

**AGENDA
CITY COUNCIL
JANUARY 16, 2018**

NOTICE:

JANUARY 16, 2018

6:00-6:30 P.M. FINANCE COMMITTEE MEETING

6:30-6:45 P.M. ECONOMIC DEVELOPMENT COMMITTEE MEETING

TOWNSHIP MEETING

JANUARY 16, 2018

- 1. PRAYER-**
- 2. PLEDGE OF ALLEGIANCE**
- 3. ROLL CALL**
- 4. TOWNBOARD MINUTES- JANUARY 2, 2018**
- 5. PRESENTATION OF COMMUNICATIONS:**
- 6. FINANCE: RON SIMPSON, CHAIRMAN**
 - A. BILL LIST- JANUARY 16, 2018**

CITY COUNCIL MEETING

JANUARY 16, 2018

- 1. ROLL CALL**
- 2. CITY COUNCIL MINUTES- JANUARY 2, 2018**
- 3. PRESENTATION OF COMMUNICATION**
- 4. REMARKS BY MAYOR**
- 5. REPORT OF STANDING COMMITTEES:**

DOWNTOWN: NIKKI PETRILLO, CHAIRMAN (CITY HALL & BUILDINGS)

A.

PLANNING/ZONING, ANNEXATIONS, ENGINEERING AND INSPECTIONS: DAN MCDOWELL, CHAIRMAN

A. MONTHLY REPORT-DECEMBER 2017

B. YEARLY REPORT-2017

C. RESOLUTION FOR DEMO AND REPAIR

- 1. 2768 WASHINGTON**
- 2. 2029 LEE AVE**
- 3. 2124 LINCOLN**
- 4. 2027 LEE AVE**
- 5. 2034 WASHINGTON**
- 6. 2630 E 24TH ST**

LEGAL AND LEGISLATIVE: BOB PICKERELL, CHAIRMAN (CABLE TV, ORDINANCE)

A.

PUBLIC WORKS: DON THOMPSON, CHAIRMAN: (STREET AND ALLEY-SANITATION-INSPECTION-TRAFFIC & LIGHTS)

A.

POLICE COMMITTEE: TIM ELLIOTT, CHAIRMAN

A.

FIRE: WALMER SCHMIDTKE, CHAIRMAN

A.

WASTEWATER TREATMENT: BILL DAVIS, CHAIRMAN

**A. RESOLUTION TO WAIVE AND RELEASE LIENS
ON 2048 13TH STREET**

INSURANCE AND SAFETY: GERALD WILLIAMS, CHAIRMAN

A. PENDING LITIGATION

B. RISK MANAGEMENT MONTHLY REPORT-01/01/18

ECONOMIC DEVELOPMENT AND NEGOTIATIONS: PAUL JACKSTADT, CHAIRMAN

A.

FINANCE: RON SIMPSON, CHAIRMAN

**A. ORDINANCE TO APPROVE THE RENEWAL OF THE
LAREDO REMOTE ACCESS LICENSE AGREEMENT AND
ESCROW ACCOUNT AGREEMENT, ALL WITH MADISON
COUNTY RECORDER**

B. PAYROLL-JANUARY 15, 2017

**Report of Officers
Unfinished Business
New Business**

ADJOURNMENT

**CITY COUNCIL
MINUTES
JANUARY 2, 2018**

Mayor Ed Hagnauer called the regular meeting to order of the city council at 7:06 p.m.

ATTENDANCE ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell, Elliott, Clerk Whitaker and Mayor Hagnauer were present.

MOTION By Williams, second by Pickerell to approve the minutes from the City Council Meeting on December 19, 2017. ALL VOTED YES. Motion carried.

MOTION By McDowell, second by Elliott to place on file the Plan Commission Minutes of December 20, 2017. ALL VOTED YES. Motion carried.

MOTION By McDowell, second by Thompson to concur with the Plan Commission to concur with the approval of a cell phone tower by the BRT Group LLC, at 2117, 2119 & 2133 14th Street. ALL VOTED YES. Motion carried.

MOTION By McDowell, second by Jackstadt to refer back to the aldermanic committee (Feb 6, 2018) the Ordinance to require licenses to conduct rodeos in Granite City Illinois.

MOTION By Pickerell, second by Davis to suspend the rules and place on final passage an Ordinance adopting a policy prohibiting sexual harassment for Granite City, Illinois.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

FINAL PASSAGE: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Pickerell, second by Davis to approve a Resolution to oppose appeal to the Property Tax Appeal Board of the State of Illinois, concerning 2901 Missouri Avenue.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Thompson, second by Simpson to place on file the Planning & Zoning Committee Meeting Minutes from December 19, 2017. ALL VOTED YES. Motion carried.

MOTION By Davis, second by Thompson to place on file the Wastewater Treatment Committee Minutes from December 19, 2017. ALL VOTED YES. Motion carried.

MOTION By Williams, second by Simpson to place on file the Insurance and Safety Committee Minutes from December 19, 2017 and for the Closed minutes to remain closed for six (6) months. ALL VOTED YES. Motion carried.

MOTION By Williams, second by Pickerell to give the City Attorneys authority to pass as directed by the council in closed session of the Insurance Meeting.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Simpson, second by McDowell to approve the Payroll for the period ending December 31, 2017 in the amount of \$741,030.82.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Simpson, second by Elliott to approve the Bill List for December 2017, in the amount of \$2,772,529.53.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Simpson, second by Petrillo to approve the Finance Committee Minutes from December 19, 2017. ALL VOTED YES. Motion carried.

MOTION by Thompson, second by Schmidtke to adjourn the City Council Meeting at 7:13 p.m. Motion carried.

MEETING ADJOURNED

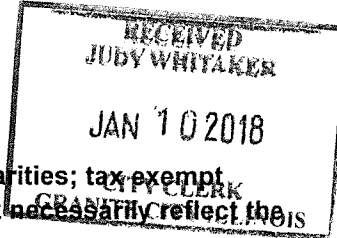
**ATTEST
JUDY WHITAKER
CITY CLERK**



City of Granite City

Inspection Department 2000 Edison, Ground Floor Granite City, IL 62040 Phone:(618) 452-6218 Fax:(618) 452-6246

MONTHLY REPORT TO CITY COUNCIL BUILDING & ZONING DEPARTMENT



DECEMBER 2017 REPORT

The Building & Zoning Department no longer issues free permits for charities; tax exempt organizations or governing bodies. The number of permits sold will not necessarily reflect the number of inspections required.

DECEMBER 2017	Permits		
Building Permits	87	\$	3,222.00
Electrical Permits	57	\$	3,055.00
Mechanical Permits	33	\$	1,840.00
Plumbing Permits	34	\$	2,556.00
Occupancy Permits	75	\$	2,925.00
Fence Permits	2	\$	80.00
Sewer	4	\$	300.00
Razing Permits DEMO	0	\$	-
Excavating Permits	6	\$	360.00
SIGN Permits	1	\$	100.00
HARC	0	\$	-
Planning & Zoning	2	\$	666.84
Board of Appeals	0	\$	-
Graphic Review	0	\$	-
Plan Review	0	\$	-
Finger Print Processing	25	\$	1,425.00
Oversize Load	1	\$	60.00
Flood Zone	0	\$	-
Misc.	0	\$	-
(Stationary Eng. Renewals)	1	\$	10.00
TOTALS	328	\$	16,599.84

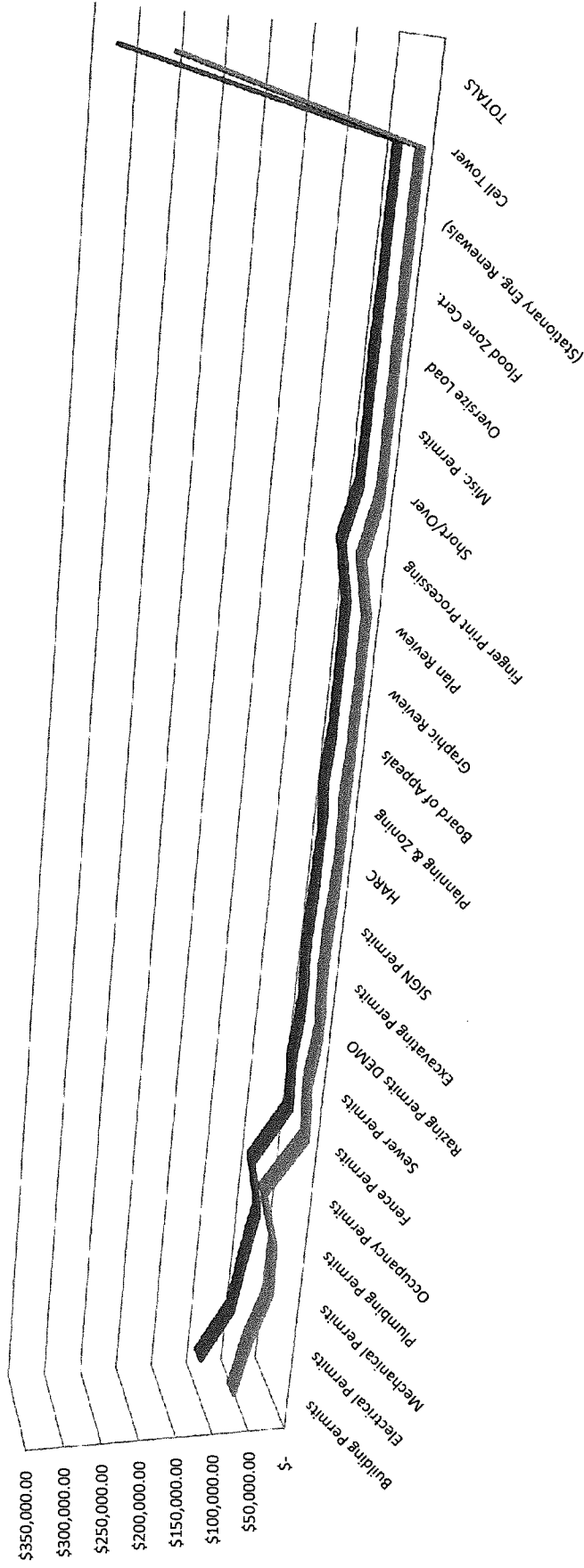
APPROX. CONSTRUCTION VALUE BASED ON

BUILDING PERMITS ISSUED THIS MONTH \$ 388,769.38

We Charge a fee for owner occupied, new home sales and temporary utility permits. The number of permits will not reflect the number of trips needed to ensure compliance.

Submitted - January 4, 2018
Sheila Nordstrom, Secretary
Building & Zoning Dept.

Jan-Dec 2015 & 2016



	Building Permits	Electrical Permits	Mechanical Permits	Plumbing Permits	Occupancy Permits	Fence Permits	Sewer Permits	Razing Permits DEMO	Excavating Permits	SIGN Permits	HARC	Planning & Zoning	Board of Appeals	Graphic Review	Plan Review	Finger Print Processing	Short/Over	Misc. Permits	Oversize Load	Flood Zone Cert.	(Stationary Eng. Renewals)	Cell Tower	TOTALS
10/2016	\$67,999.00	\$53,225.00	\$29,795.00	\$32,486.00	\$53,875.00	\$4,240.00	\$9,100.00	\$840.00	\$5,835.00	\$4,213.00	\$465.57	\$2,824.61	\$648.35	\$130.84	\$850.00	\$15,519.00	\$5.00	\$111.55	\$510.00	\$5.00	\$260.00	\$5.00	\$381,629.92
10/2017	\$95,912.00	\$56,117.00	\$45,670.00	\$33,548.00	\$48,775.00	\$4,514.00	\$7,310.00	\$880.00	\$5,140.00	\$2,815.00	\$5.00	\$5,782.23	\$229.05	\$496.24	\$1,600.00	\$17,222.50	\$5.00	\$5.00	\$1,770.00	\$5.00	\$260.00	\$5.00	\$328,371.02

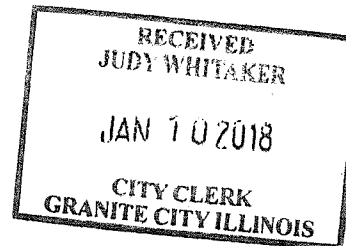


City of Granite City

Inspection Department 2000 Edison, Ground Floor Granite City, IL 62040 Phone:(618) 452-6218 Fax:(618) 452-6246

YEARLY REPORT TO CITY COUNCIL

BUILDING & ZONING DEPARTMENT



JANUARY-DECEMBER 2017 REPORT

The Building & Zoning Department no longer issues free permits for charities; tax exempt organizations or governing bodies. The number of permits sold will not necessarily reflect the number of inspections required.

JAN-DEC 2017	Permits		
Building Permits	1420	\$	95,912.00
Electrical Permits	1057	\$	56,117.00
Mechanical Permits	557	\$	45,670.00
Plumbing Permits	460	\$	33,548.00
Occupancy Permits	1396	\$	48,775.00
Fence Permits	120	\$	4,514.00
Sewer Permits	91	\$	7,310.00
Razing Permits DEMO	31	\$	880.00
Excavating Permits	69	\$	5,140.00
SIGN Permits	16	\$	2,815.00
HARC	0	\$	-
Planning & Zoning	17	\$	5,782.23
Board of Appeals	3	\$	229.05
Graphic Review	3	\$	826.24
Plan Review	11	\$	1,600.00
Finger Print Processing	342	\$	17,222.50
Short/Over	0	\$	-
Misc. Permits	0	\$	-
Oversize Load	31	\$	1,770.00
Flood Zone Cert.	0	\$	-
(Stationary Eng. Renewals)	26	\$	260.00
Cell Tower	0	\$	-
TOTALS	5650	\$	328,371.02

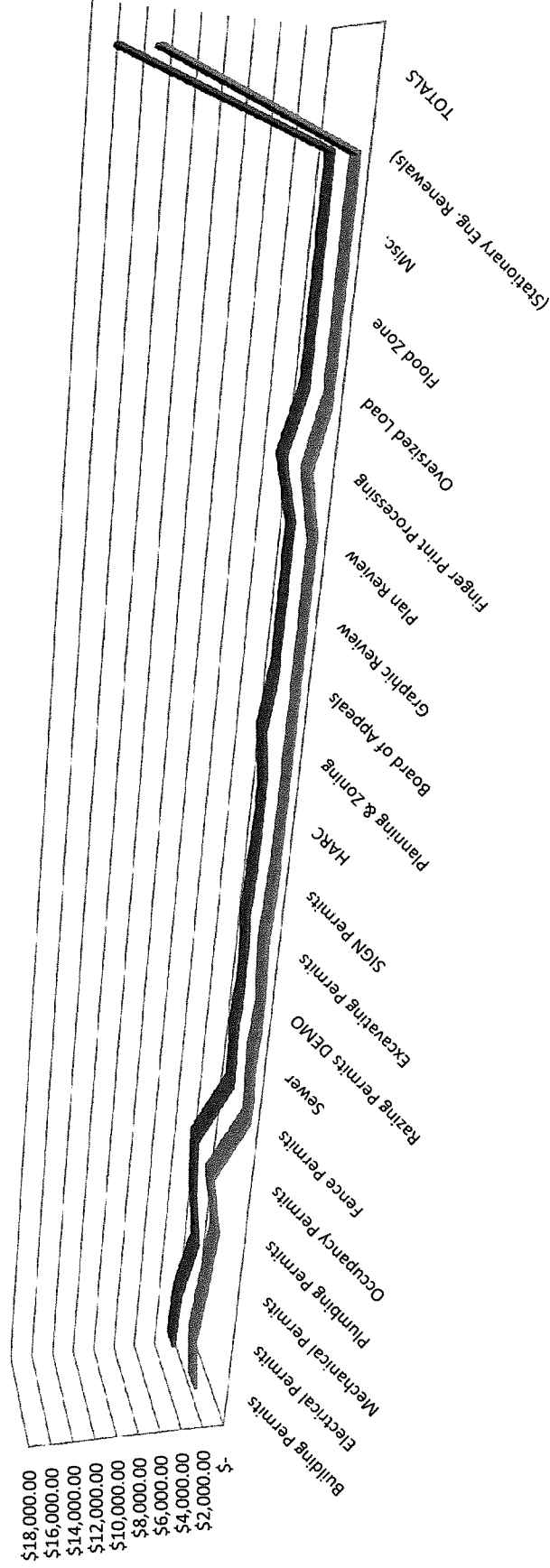
APPROX. CONSTRUCTION VALUE BASED ON

BUILDING PERMITS ISSUED THIS YEAR \$ 21,969,381.95

We Charge a fee for owner occupied, new home sales and temporary utility permits. The number of permits will not reflect the number of trips needed to ensure compliance.

Submitted - January 4, 2018
Sheila Nordstrom, Secretary
Building & Zoning Dept.

December 2016 & 2017



	Building Permits	Electrical Permits	Mechanical Permits	Plumbing Permits	Occupancy Permits	Fence Permits	Sewer	Razing Permits DEMO	Excavating Permits	SIGN Permits	HARC	Planning & Zoning	Board of Appeals	Graphic Review	Plan Review	Finger Print Processing	Overstred Load	Flood Zone	Misc.	(Stationary Eng. Renewals)	TOTALS
# 2016	\$2,496.00	\$2,935.00	\$2,380.00	\$1,950.00	\$2,950.00	\$80.00	\$300.00	\$40.00	\$415.00	\$140.00	\$-	\$-	\$-	\$-	\$-	\$1,140.00	\$-	\$-	\$35.00	\$-	\$14,861.00
# 2017	\$3,272.00	\$3,055.00	\$1,840.00	\$2,556.00	\$2,925.00	\$80.00	\$300.00	\$-	\$360.00	\$100.00	\$-	\$666.84	\$-	\$-	\$-	\$1,435.00	\$60.00	\$-	\$-	\$10.00	\$16,599.84

2768 WASHINGTON

RESOLUTION

A Resolution providing for the demolition or repair of a dangerous and unsafe building described more herein below:

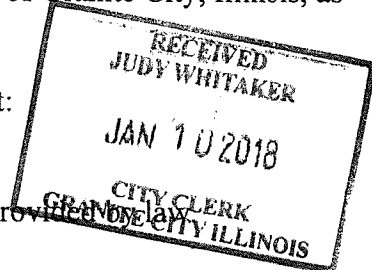
BE IT HEREBY RESOLVED by the City Council of the City of Granite City, Illinois, as follows:

SECTION 1: That the building described herein below, to-wit:

COMMON ADDRESS: 2768 WASHINGTON

PERMANENT PARCEL NUMBER: 22-2-20-17-09-106-016

is dangerous and unsafe and should be demolished or repaired as provided by law.



SECTION 2: The determination that said building is dangerous and unsafe and a menace to life and property in the vicinity thereof and, therefore, a public nuisance is based upon the investigation report(s), information, and expertise of the building inspectors(s), as contained in the following:

See attached report(s) (Exhibit "A") and photo(s) (Exhibit "B")

which is/are attached hereto and incorporated herein by reference.

SECTION 3: The building inspector is authorized and directed to demolish said building.

SECTION 4: The Clerk of the City, or any other official of the City designated by the Mayor, is authorized and directed to give written notice as provided by law to the person or persons entitled to receive the same that the City will seek demolition of subject building(s) pursuant to all the rights and duties available to the City under current Illinois Statute designated the powers of a municipality in regard to demolition of buildings, unless the same shall have been demolished within thirty (30) days after issuance of such notice.

PASSED by the City Council of the City of Granite City, Illinois, this _____ day of _____, 20 ____.

APPROVED by the Mayor of the City of Granite City, Illinois, this _____ day of _____, 20 ____.

MAYOR

ATTESTED:

CITY CLERK

(SEAL)

Memo to File

October 27, 2017

RE: 2768 Washington

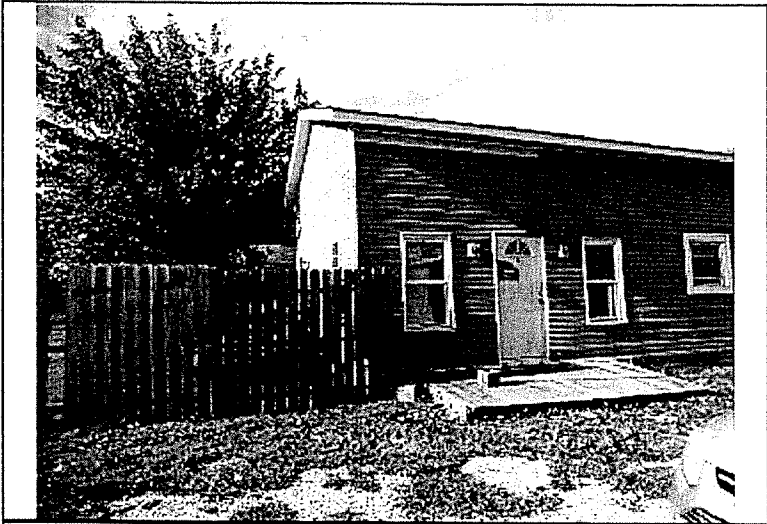
Recent inspection of the property located above revealed the following:

- 1. The building is vacant and abandoned without utilities.**
- 2. The building is open and accessible allowing access by delinquents and vagabonds.**
- 3. The building is decayed from termite and weather rot causing the foundation walls and roof to collapse.**
- 4. The building has broken windows, sagging gutters, decayed fascia boards, boarded up doors and windows.**
- 5. The electrical service needs to be upgraded and the residence needs to be inspected to insure that the electric is in compliance with City codes.**
- 6. The building is cluttered with junk, trash, and debris not in proper containers.**
- 7. The presence of rodents or other wild animals in and about the premises.**

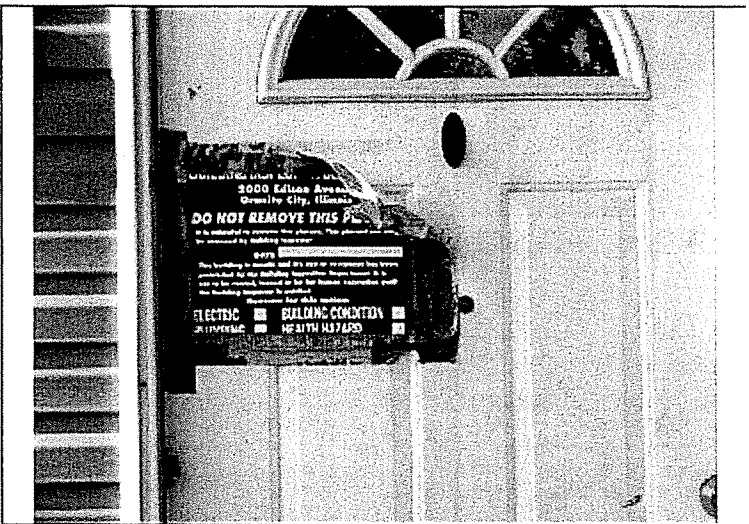
It is the opinion of this office that the building poses a hazard to the community and the cost to bring the property up to code compliance will exceed 51% of the value of the property.

Building and Zoning Administrator

2768 Washington 10-27-17



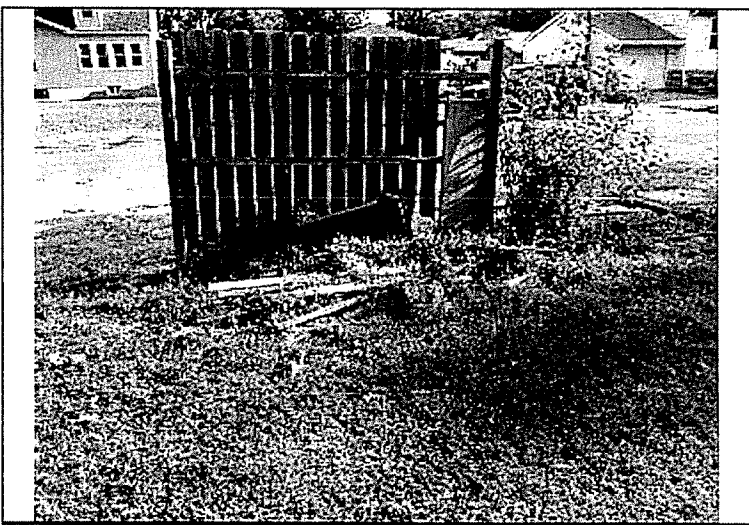
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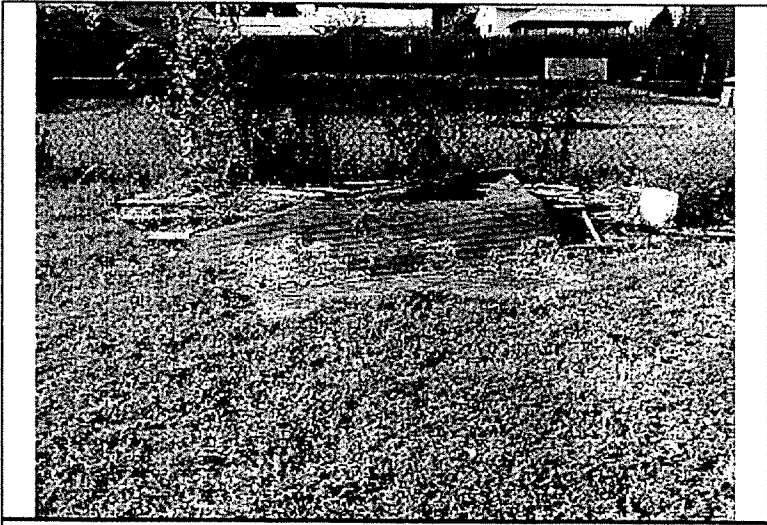
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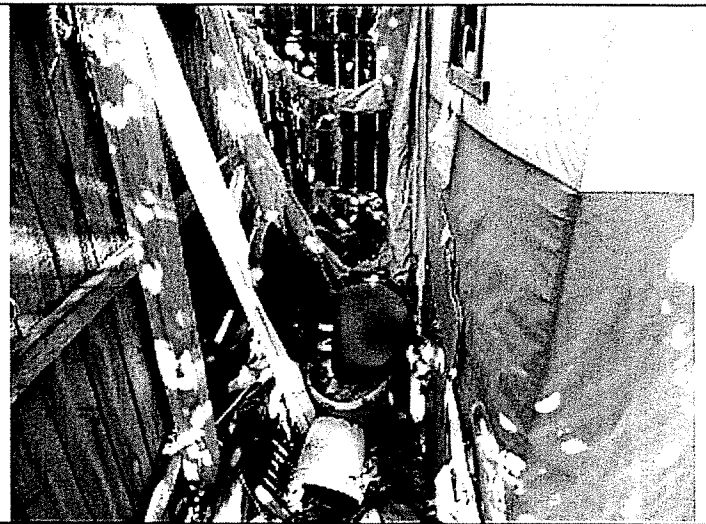


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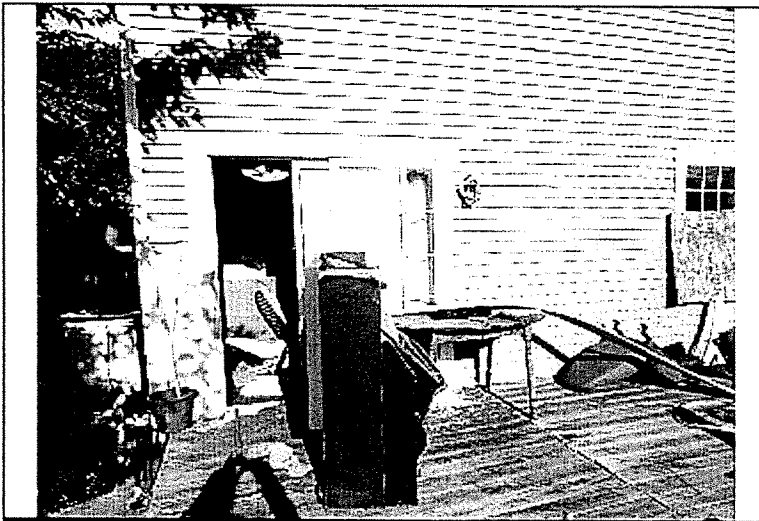
2768 Washington 10-27-17



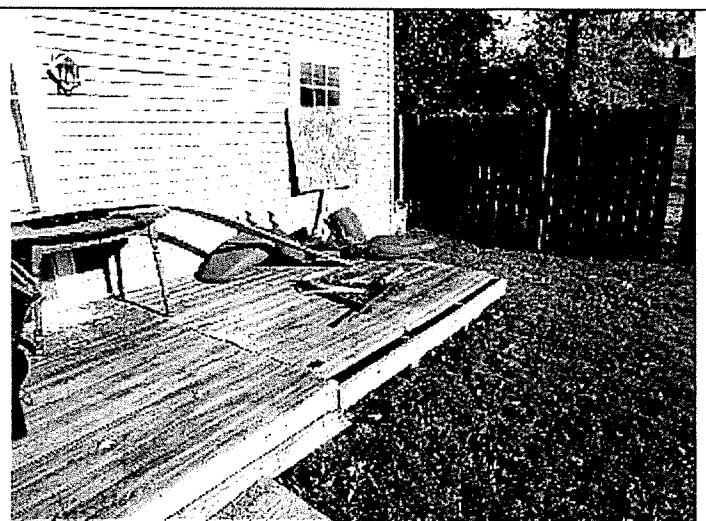
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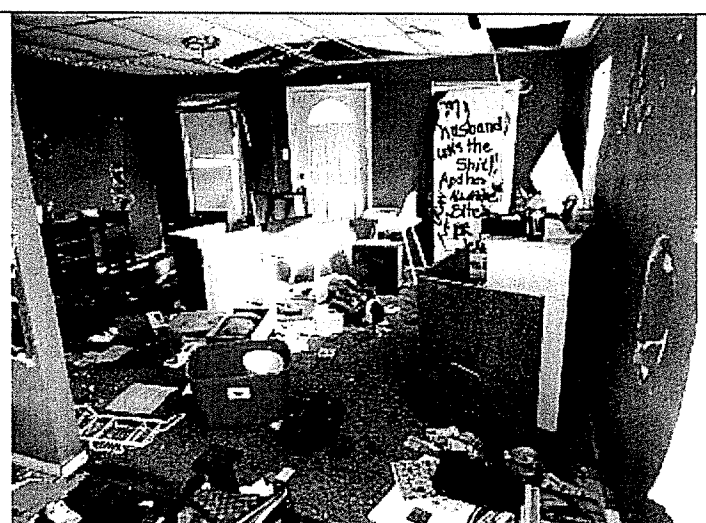
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2029 LEE AVE

RESOLUTION

A Resolution providing for the demolition or repair of a dangerous and unsafe building described more herein below:

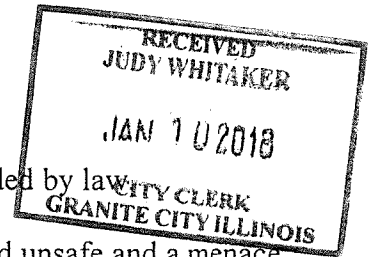
BE IT HEREBY RESOLVED by the City Council of the City of Granite City, Illinois, as follows:

SECTION 1: That the building described herein below, to-wit:

COMMON ADDRESS: 2029 LEE AVE

PERMANENT PARCEL NUMBER: 22-2-20-19-06-104-026

is dangerous and unsafe and should be demolished or repaired as provided by law



SECTION 2: The determination that said building is dangerous and unsafe and a menace to life and property in the vicinity thereof and, therefore, a public nuisance is based upon the investigation report(s), information, and expertise of the building inspectors(s), as contained in the following:

See attached report(s) (Exhibit "A") and photo(s) (Exhibit "B")

which is/are attached hereto and incorporated herein by reference.

SECTION 3: The building inspector is authorized and directed to demolish said building.

SECTION 4: The Clerk of the City, or any other official of the City designated by the Mayor, is authorized and directed to give written notice as provided by law to the person or persons entitled to receive the same that the City will seek demolition of subject building(s) pursuant to all the rights and duties available to the City under current Illinois Statute designated the powers of a municipality in regard to demolition of buildings, unless the same shall have been demolished within thirty (30) days after issuance of such notice.

PASSED by the City Council of the City of Granite City, Illinois, this _____ day of _____, 20 ____.

APPROVED by the Mayor of the City of Granite City, Illinois, this _____ day of _____, 20 ____.

MAYOR

ATTESTED:

CITY CLERK

(SEAL)

Memo to File

October 10, 2017

RE: 2029 Lee

Recent inspection of the property located above revealed the following:

- 1. The building is vacant and abandoned without utilities.**
- 2. The building is open and accessible allowing access by delinquents and vagabonds.**
- 3. The building has broken windows, sagging gutters, boarded up doors and windows.**
- 4. The utilities including the electrical service needs to be upgraded and the residence needs to be inspected to insure that it is compliant with current City codes.**
- 5. The building is cluttered with junk, trash, and debris not in proper containers.**
- 6. The presence of rodents or other wild animals in and about the premises.**

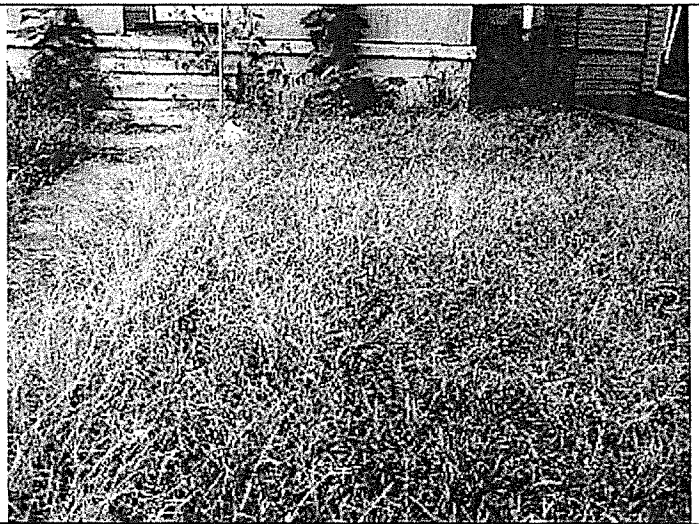
It is the opinion of this office that the building poses a hazard to the community and the cost to bring the property up to code compliance will exceed 51% of the value of the property.

Building and Zoning Administrator

2029 LEE 10/09/17



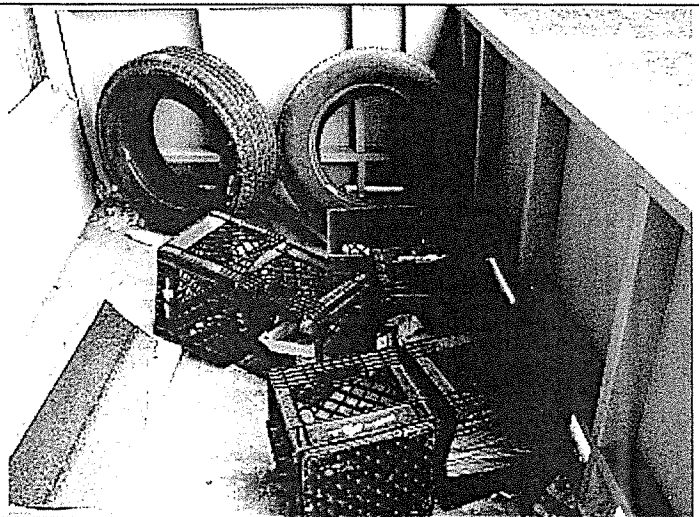
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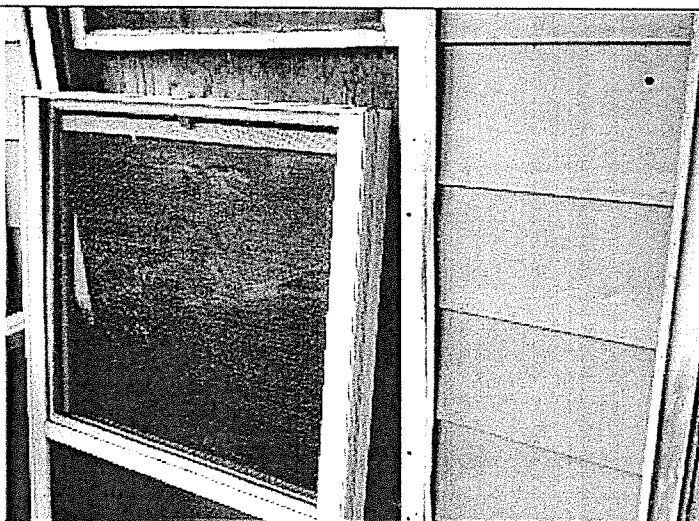
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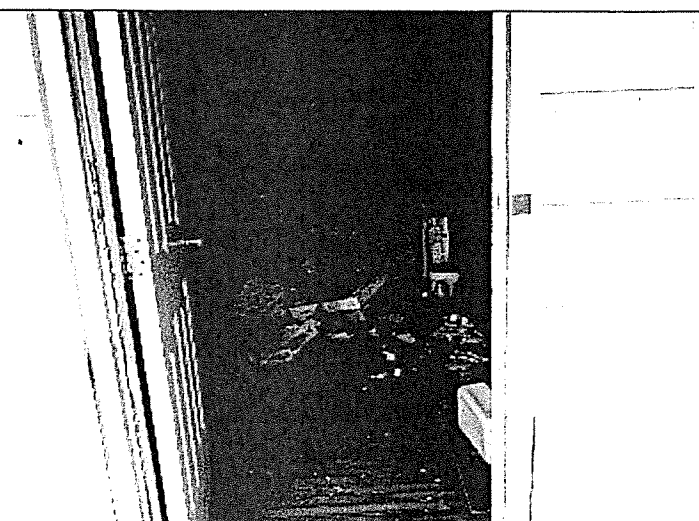
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SAM_2081
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SAM_2082
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1024 x 768



SAM_2083
334 kb
1024 x 768

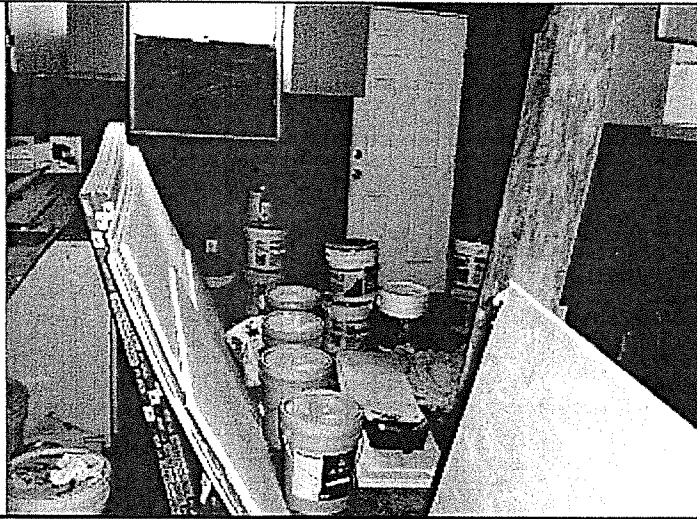
2029 LEE 10/09/17



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1024 x 768



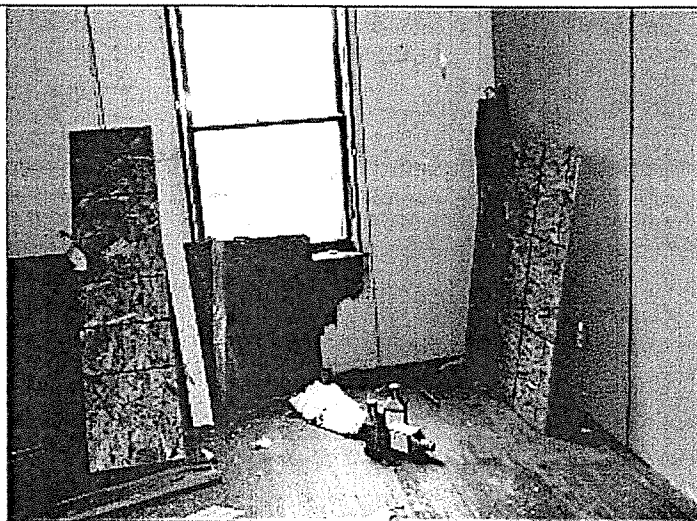
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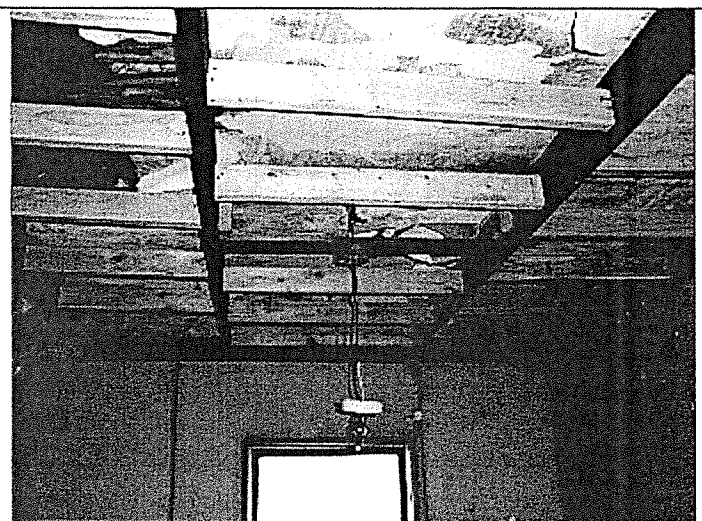
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SAM_2087
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SAM_2088
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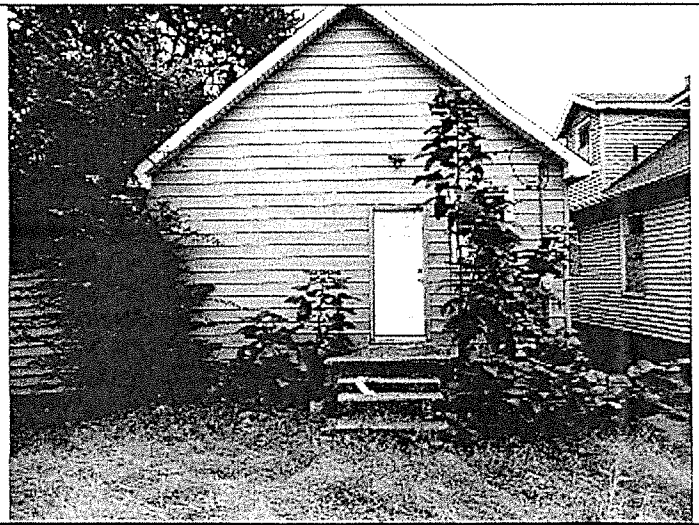


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2029 LEE 10/09/17



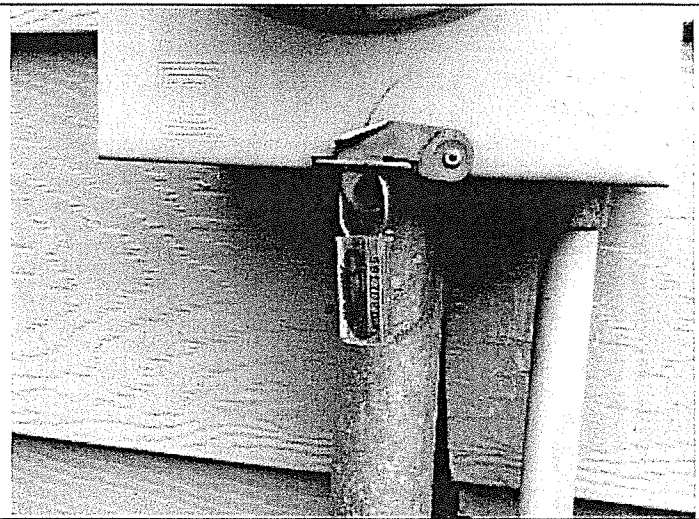
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2124 LINCOLN

RESOLUTION

A Resolution providing for the demolition or repair of a dangerous and unsafe building described more herein below:

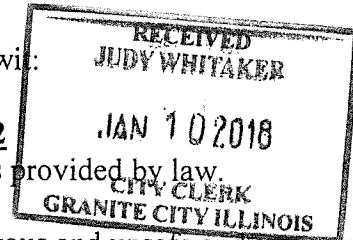
BE IT HEREBY RESOLVED by the City Council of the City of Granite City, Illinois, as follows:

SECTION 1: That the building described herein below, to-wit:

COMMON ADDRESS: 2124 LINCOLN

PERMANENT PARCEL NUMBER: 22-2-20-18-20-404-002

is dangerous and unsafe and should be demolished or repaired as provided by law.



SECTION 2: The determination that said building is dangerous and unsafe and a menace to life and property in the vicinity thereof and, therefore, a public nuisance is based upon the investigation report(s), information, and expertise of the building inspectors(s), as contained in the following:

See attached report(s) (Exhibit "A") and photo(s) (Exhibit "B")

which is/are attached hereto and incorporated herein by reference.

SECTION 3: The building inspector is authorized and directed to demolish said building.

SECTION 4: The Clerk of the City, or any other official of the City designated by the Mayor, is authorized and directed to give written notice as provided by law to the person or persons entitled to receive the same that the City will seek demolition of subject building(s) pursuant to all the rights and duties available to the City under current Illinois Statute designated the powers of a municipality in regard to demolition of buildings, unless the same shall have been demolished within thirty (30) days after issuance of such notice.

PASSED by the City Council of the City of Granite City, Illinois, this _____ day of _____, 20 ____.

APPROVED by the Mayor of the City of Granite City, Illinois, this _____ day of _____, 20 ____.

MAYOR

ATTESTED:

CITY CLERK

(SEAL)

Memo to File

October 25, 2017

RE: 2124 Lincoln

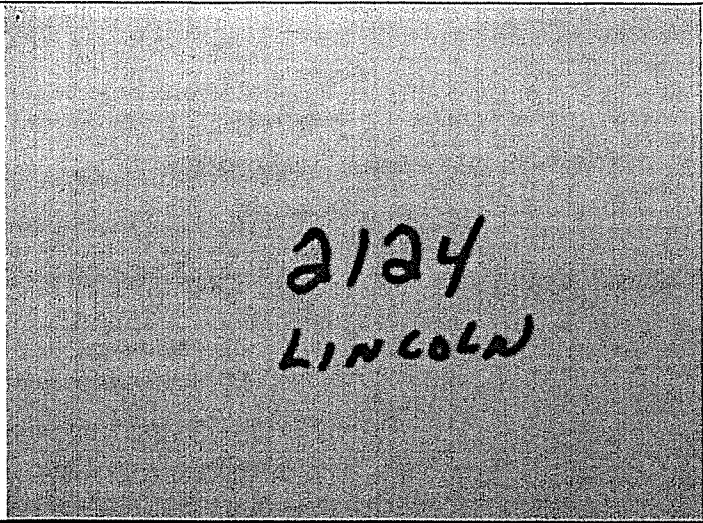
Recent inspection of the property located above revealed the following:

- 1. The building is vacant and abandoned without utilities.**
- 2. The building is open and accessible allowing access by delinquents and vagabonds.**
- 3. The building is decayed from termite and weather rot causing the foundation walls and roof to collapse.**
- 4. The building has broken windows, sagging gutters, decayed fascia boards, boarded up doors and windows.**
- 5. The electrical service needs to be upgraded and the residence needs to be inspected to insure that the electric is in compliance with City codes.**
- 6. The building is cluttered with junk, trash, and debris not in proper containers.**
- 7. The presence of rodents or other wild animals in and about the premises.**

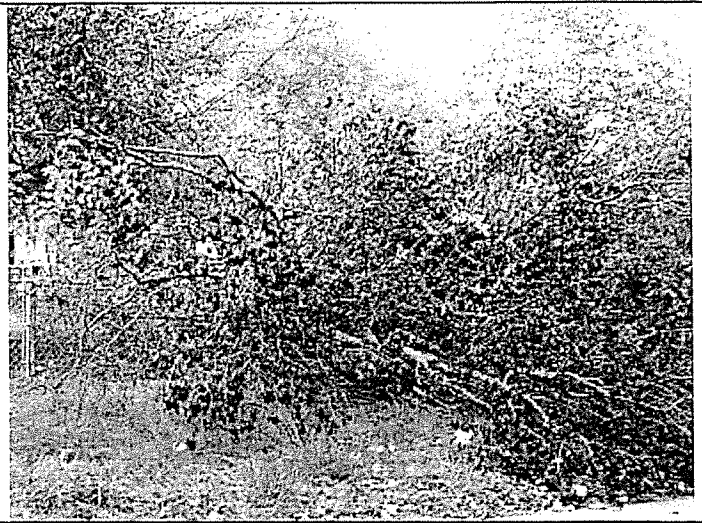
It is the opinion of this office that the building poses a hazard to the community and the cost to bring the property up to code compliance will exceed 51% of the value of the property.

Building and Zoning Administrator

2124 LINCOLN 10-24-17 10:45 AM JB



DSCN4476



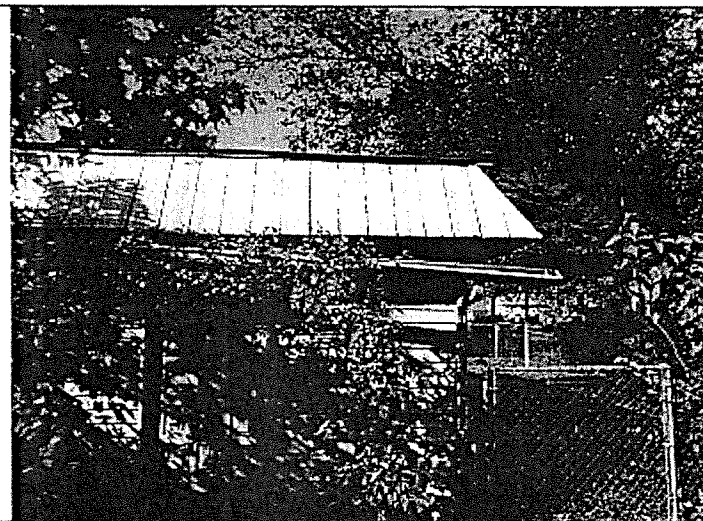
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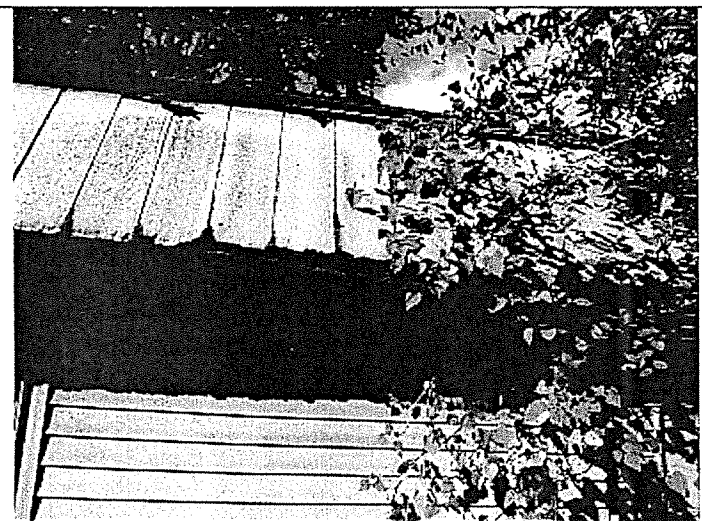
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DSCN4479

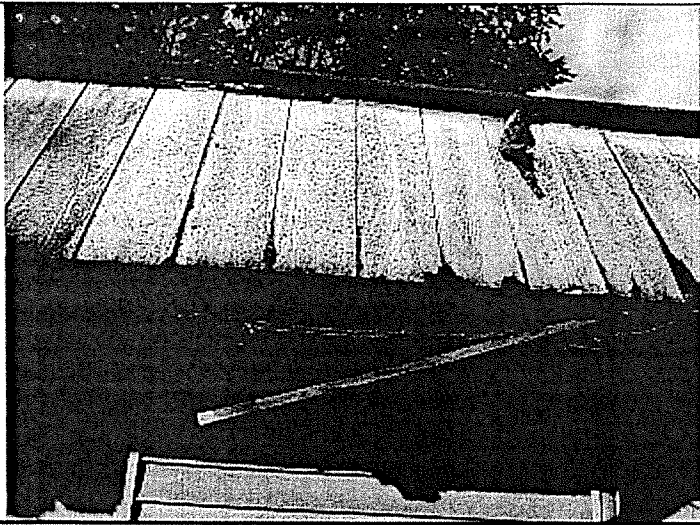


DSCN4480



DSCN4481

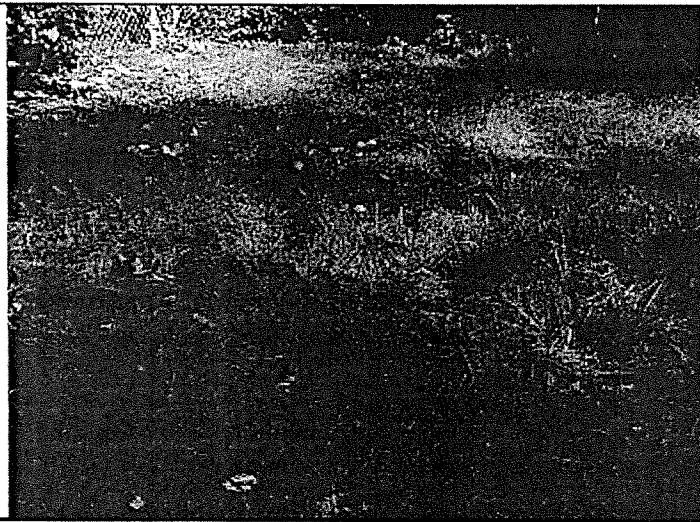
2124 LINCOLN 10-24-17 10:45 AM JB



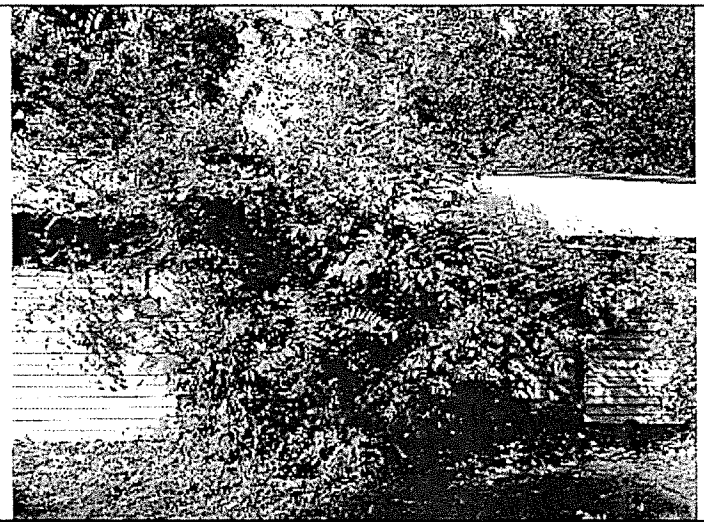
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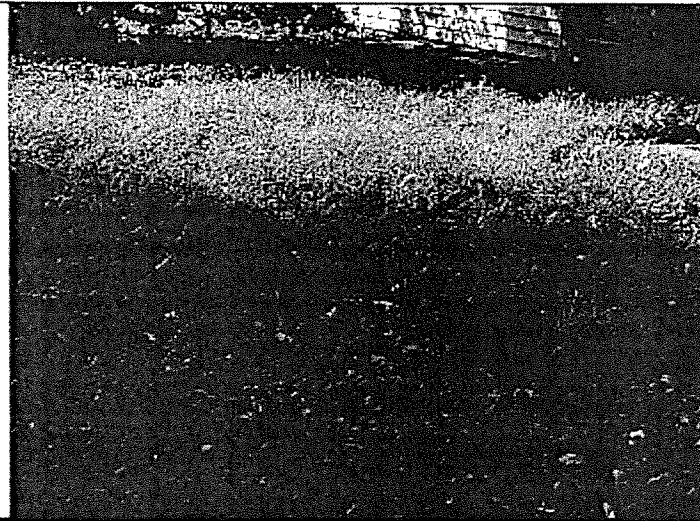
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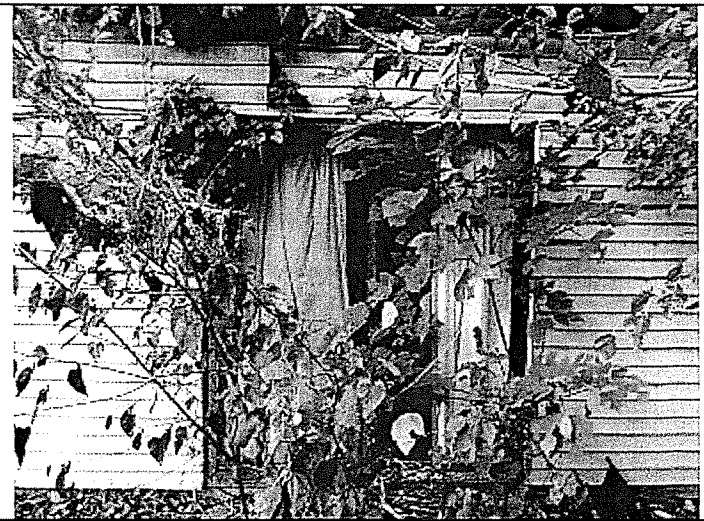
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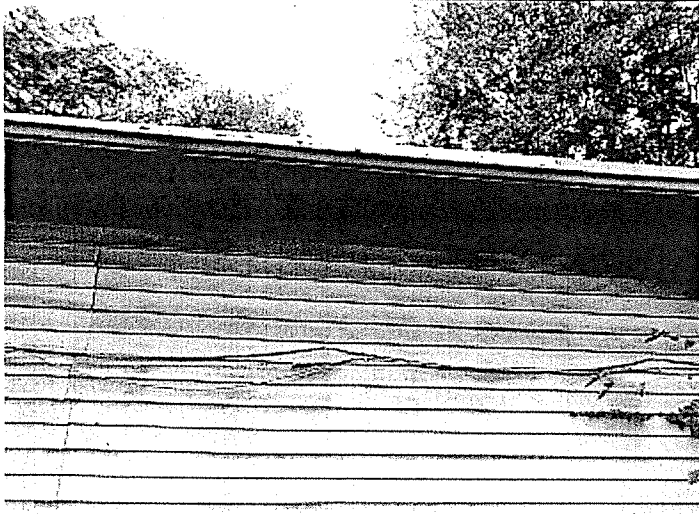


DSCN4486



DSCN4487

2124 LINCOLN 10-24-17 10:45 AM JB



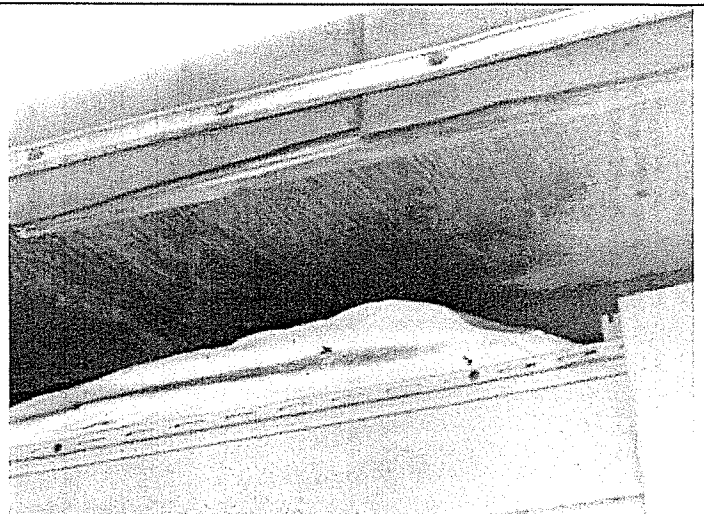
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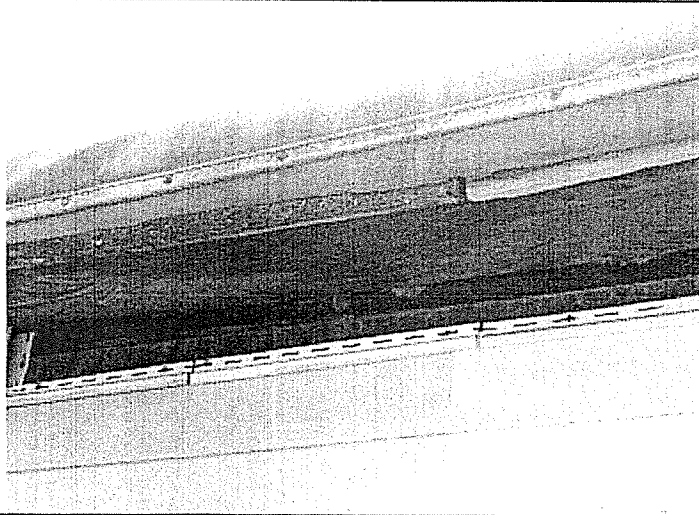
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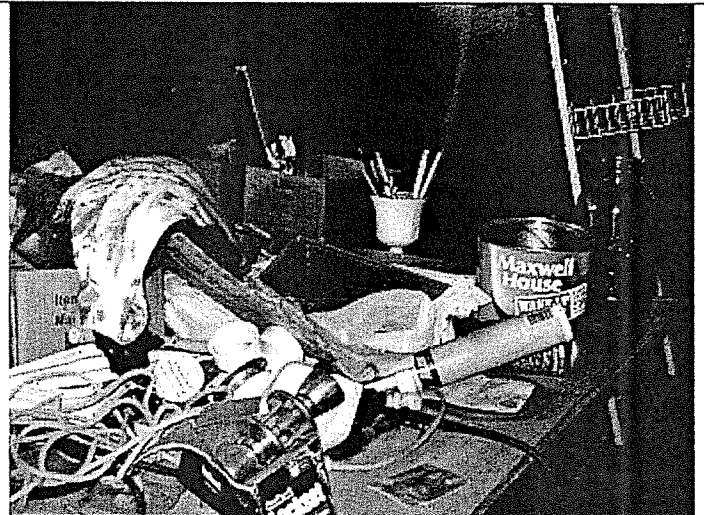
DSCN4490



DSCN4491



DSCN4492



DSCN4493

2027 LEE AVE

RESOLUTION

A Resolution providing for the demolition or repair of a dangerous and unsafe building described more herein below:

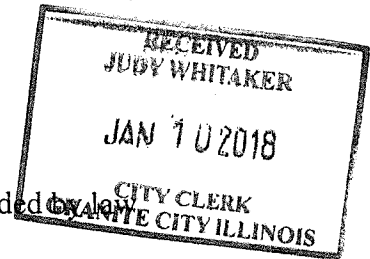
BE IT HEREBY RESOLVED by the City Council of the City of Granite City, Illinois, as follows:

SECTION 1: That the building described herein below, to-wit:

COMMON ADDRESS: 2027 LEE AVE

PERMANENT PARCEL NUMBER: 22-2-20-19-06-104-025

is dangerous and unsafe and should be demolished or repaired as provided by law



SECTION 2: The determination that said building is dangerous and unsafe and a menace to life and property in the vicinity thereof and, therefore, a public nuisance is based upon the investigation report(s), information, and expertise of the building inspectors(s), as contained in the following:

See attached report(s) (Exhibit "A") and photo(s) (Exhibit "B")

which is/are attached hereto and incorporated herein by reference.

SECTION 3: The building inspector is authorized and directed to demolish said building.

SECTION 4: The Clerk of the City, or any other official of the City designated by the Mayor, is authorized and directed to give written notice as provided by law to the person or persons entitled to receive the same that the City will seek demolition of subject building(s) pursuant to all the rights and duties available to the City under current Illinois Statute designated the powers of a municipality in regard to demolition of buildings, unless the same shall have been demolished within thirty (30) days after issuance of such notice.

PASSED by the City Council of the City of Granite City, Illinois, this _____ day of _____, 20 ____.

APPROVED by the Mayor of the City of Granite City, Illinois, this _____ day of _____, 20 ____.

MAYOR

ATTESTED:

CITY CLERK

(SEAL)

Memo to File

October 9, 2017

RE: 2027 Lee

Recent inspection of the property located above revealed the following:

- 1. The building is vacant and abandoned without utilities.**
- 2. The building is open and accessible allowing access by delinquents and vagabonds.**
- 3. The building is decayed from termite and weather rot causing the foundation walls and roof to collapse.**
- 4. The building has broken windows, broken doors, sagging gutters, decayed fascia boards, boarded up doors and windows.**
- 5. The electrical service needs to be upgraded and the residence needs to be inspected to insure that the electric is in compliance with City codes.**
- 6. The premise has raw sewage being collected in a barrel in the basement.**
- 7. The building is cluttered with junk, trash, and debris not in proper containers.**
- 8. The presence of rodents or other wild animals in and about the premises.**

It is the opinion of this office that the building poses a hazard to the community and the cost to bring the property up to code compliance will exceed 51% of the value of the property.

Building and Zoning Administrator

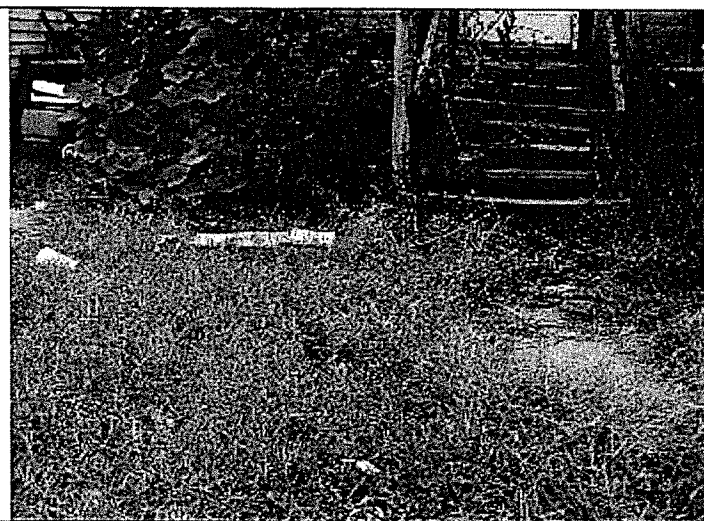
2027 LEE 10/09/17



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SAM_2095
332 kb
1024 x 768



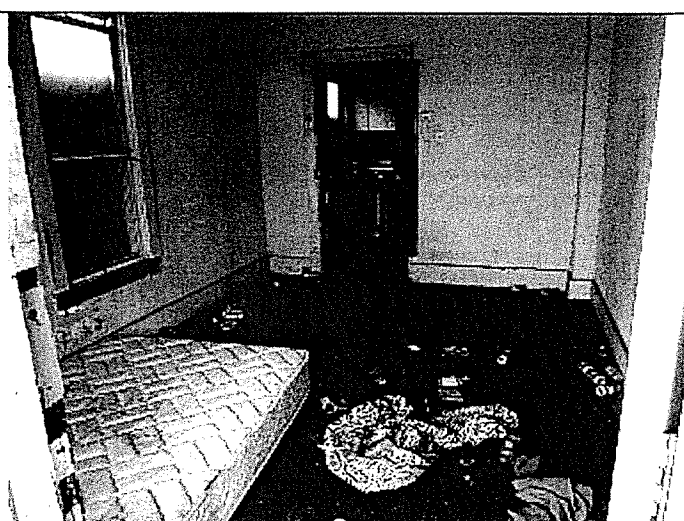
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SAM_2097
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1024 x 768

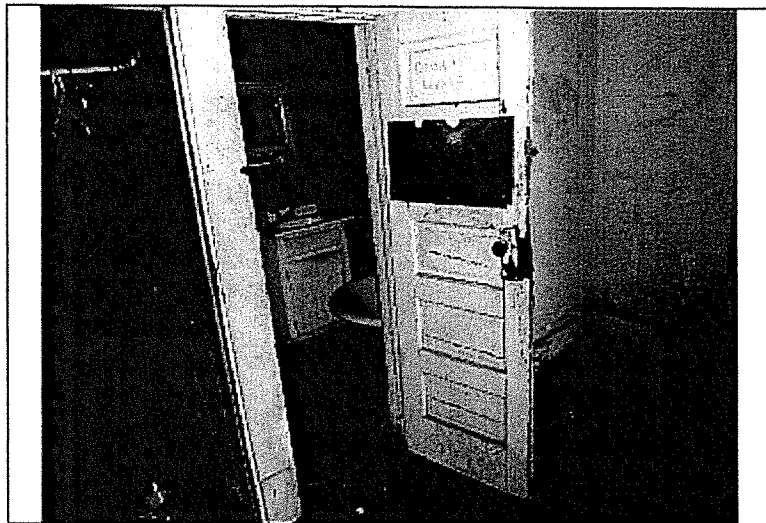


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1024 x 768

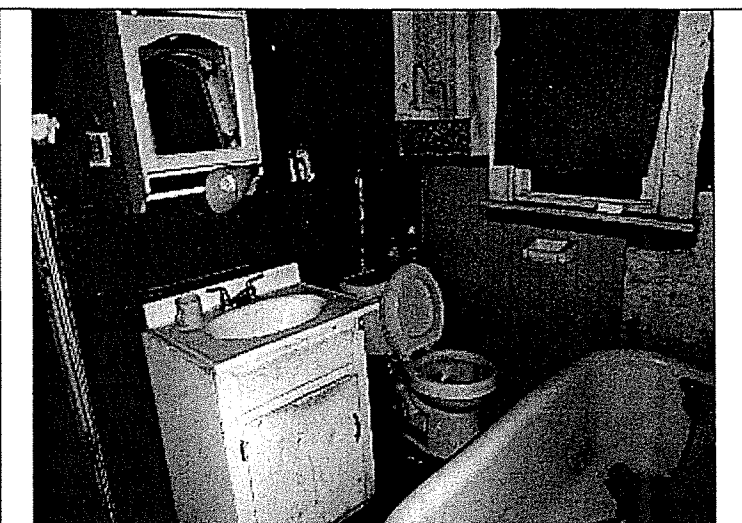


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1024 x 768

2027 LEE 10/09/17



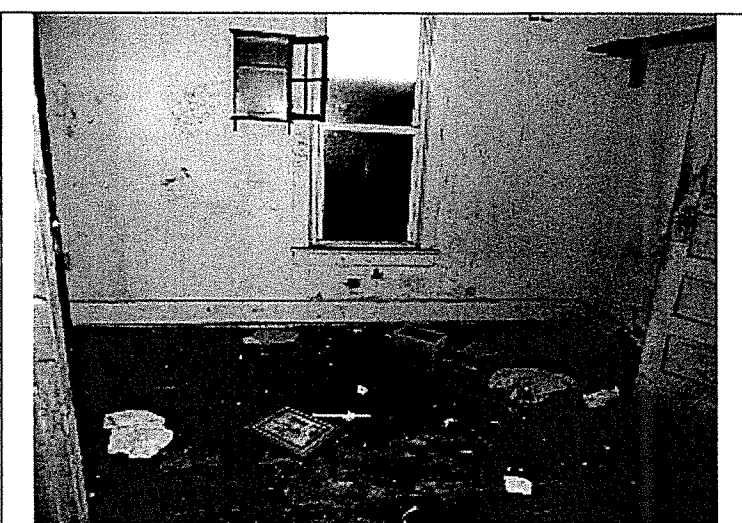
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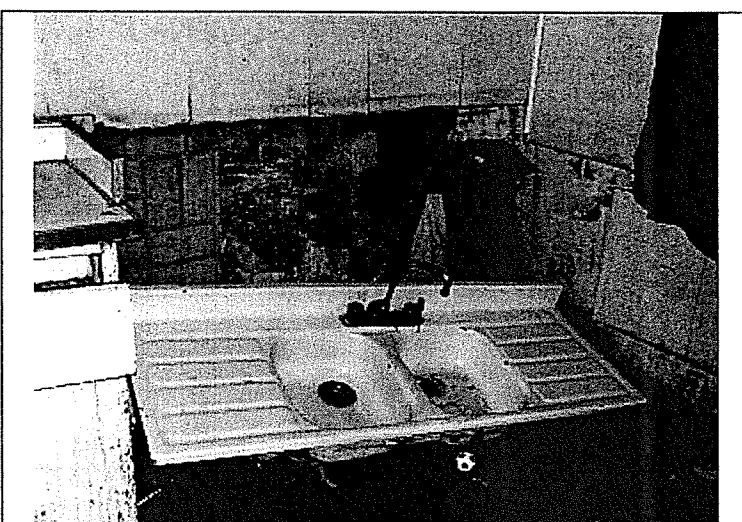
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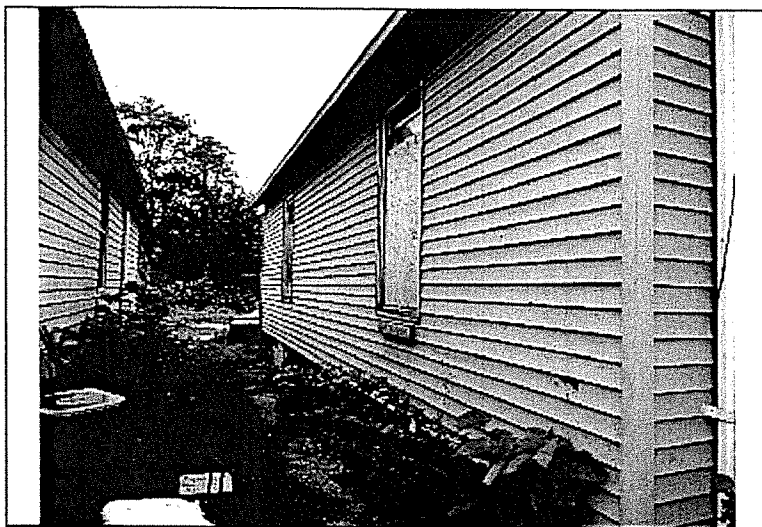


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SAM_2105
343 kb
1024 x 768

2027 LEE 10/09/17



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338 kb
1024 x 768



SAM_2107
340 kb
1024 x 768



SAM_2108
342 kb
1024 x 768



SAM_2109
348 kb
1024 x 768



SAM_2110
338 kb
1024 x 768



SAM_2111
336 kb
1024 x 768

2034 WASHINGTON

RESOLUTION

A Resolution providing for the demolition or repair of a dangerous and unsafe building described more herein below:

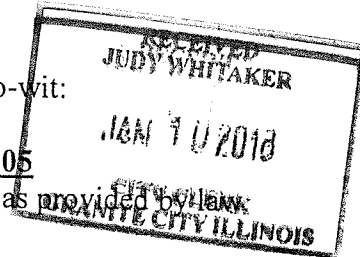
BE IT HEREBY RESOLVED by the City Council of the City of Granite City, Illinois, as follows:

SECTION 1: That the building described herein below, to-wit:

COMMON ADDRESS: 2034 WASHINGTON

PERMANENT PARCEL NUMBER: 22-2-20-19-06-104-005

is dangerous and unsafe and should be demolished or repaired as provided by law.



SECTION 2: The determination that said building is dangerous and unsafe and a menace to life and property in the vicinity thereof and, therefore, a public nuisance is based upon the investigation report(s), information, and expertise of the building inspectors(s), as contained in the following:

See attached report(s) (Exhibit "A") and photo(s) (Exhibit "B")

which is/are attached hereto and incorporated herein by reference.

SECTION 3: The building inspector is authorized and directed to demolish said building.

SECTION 4: The Clerk of the City, or any other official of the City designated by the Mayor, is authorized and directed to give written notice as provided by law to the person or persons entitled to receive the same that the City will seek demolition of subject building(s) pursuant to all the rights and duties available to the City under current Illinois Statute designated the powers of a municipality in regard to demolition of buildings, unless the same shall have been demolished within thirty (30) days after issuance of such notice.

PASSED by the City Council of the City of Granite City, Illinois, this _____ day of _____, 20 ____.

APPROVED by the Mayor of the City of Granite City, Illinois, this _____ day of _____, 20 ____.

MAYOR

ATTESTED:

CITY CLERK

(SEAL)

Memo to File

October 10, 2017

RE: 2034 Washington

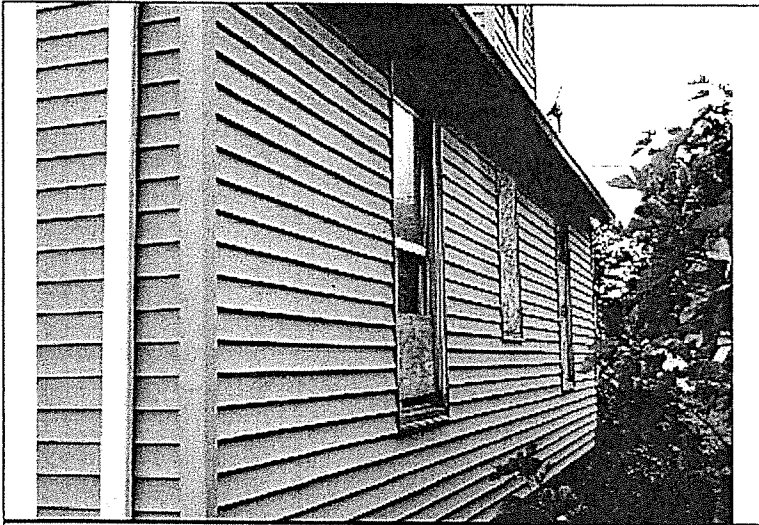
Recent inspection of the property located above revealed the following:

- 1. The building is vacant and abandoned without utilities.**
- 2. The building is open and accessible allowing access by delinquents and vagabonds.**
- 3. The building is in a state of disrepair, completely gutted with cracked foundation and possible structural problems.**
- 4. The building has broken and boarded up windows, decayed and exposed sheeting, no gutters, decayed fascia boards, missing siding and deteriorated foundation.**
- 5. The electrical service needs to be upgraded and the residence needs to be inspected to insure that the electric is in compliance with City codes.**
- 6. The building is cluttered with junk, trash, and debris not in proper containers.**
- 7. The presence of rodents or other wild animals in and about the premises.**

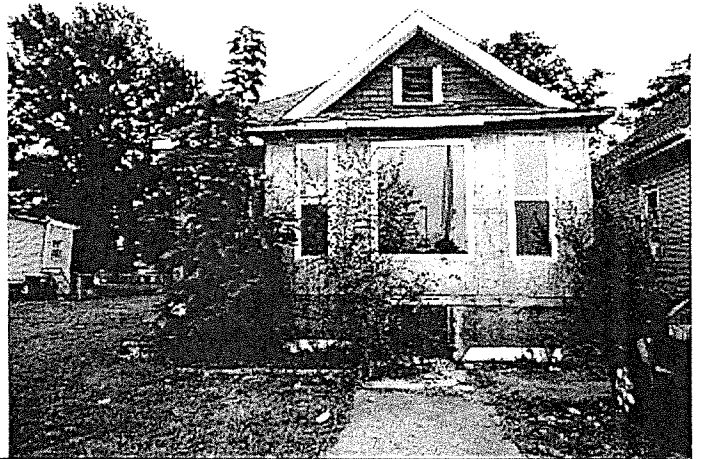
It is the opinion of this office that the building poses a hazard to the community and the cost to bring the property up to code compliance will exceed 51% of the value of the property.

Building and Zoning Administrator

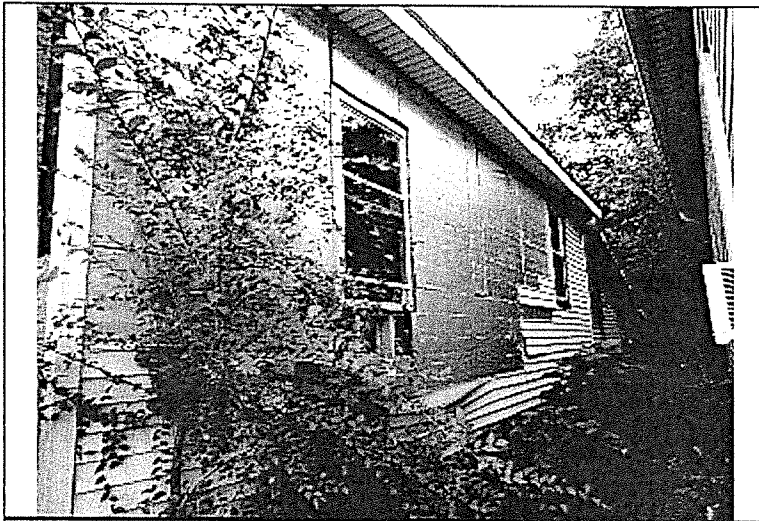
2034 WASHINGTON 10/09/17



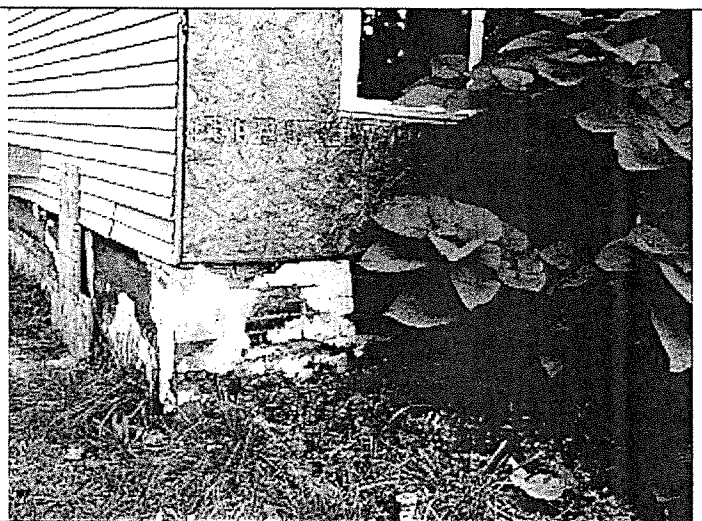
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1024 x 768



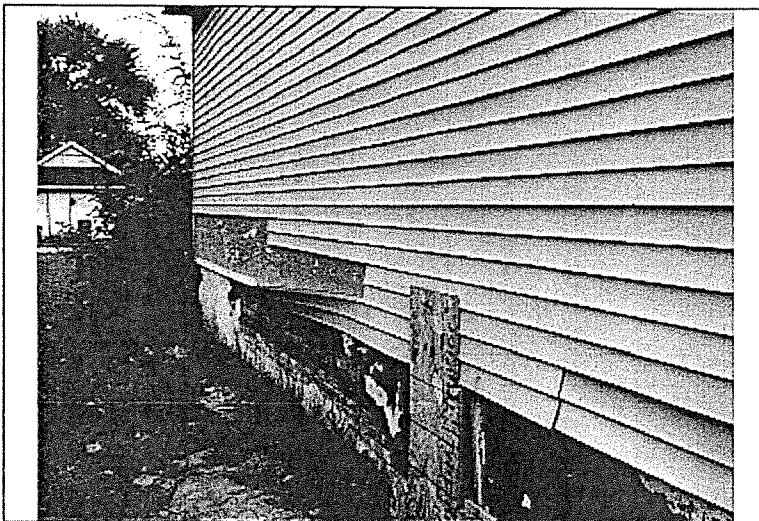
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347 kb
1024 x 768



SAM_2118
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1024 x 768

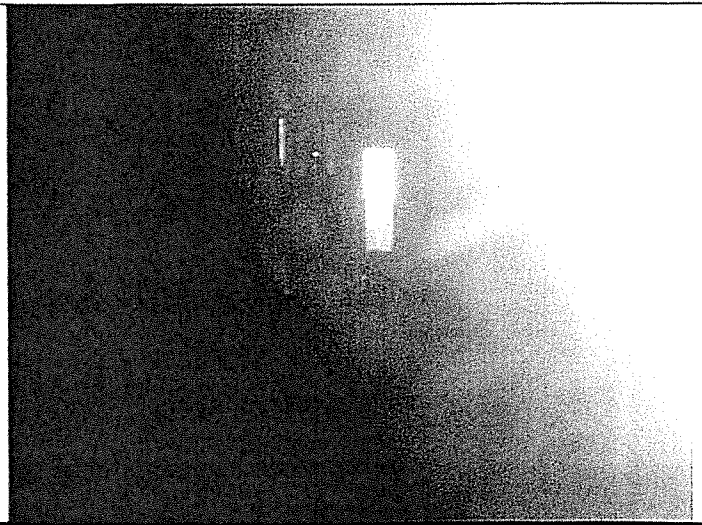


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1024 x 768

2034 WASHINGTON 10/09/17



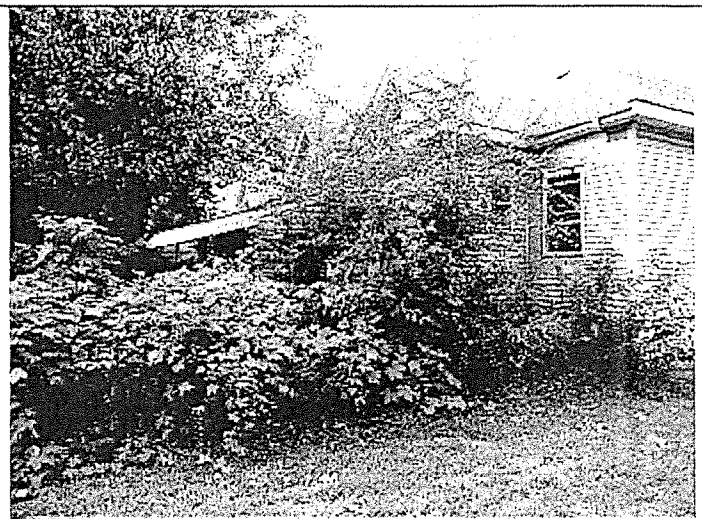
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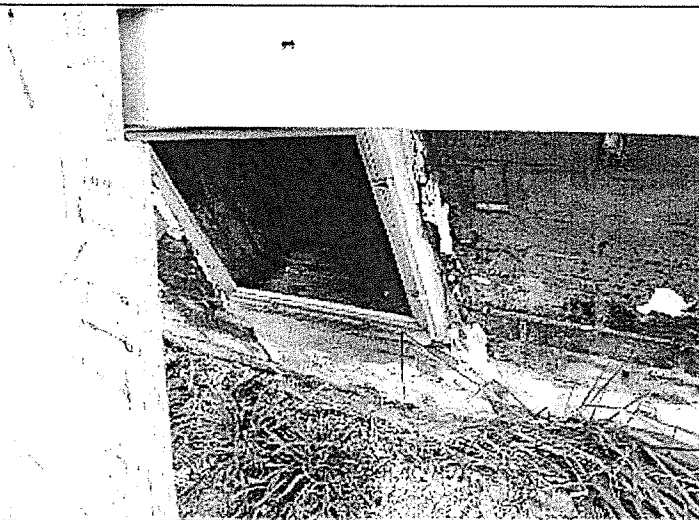
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1024 x 768



SAM_2122
350 kb
1024 x 768



SAM_2123
332 kb
1024 x 768



SAM_2124
337 kb
1024 x 768

2630 E 24TH ST

RESOLUTION

A Resolution providing for the demolition or repair of a dangerous and unsafe building described more herein below:

BE IT HEREBY RESOLVED by the City Council of the City of Granite City, Illinois, as follows:

SECTION 1: That the building described herein below, to-wit:

COMMON ADDRESS: 2630 E 24TH ST

PERMANENT PARCEL NUMBER: 22-2-20-17-18-303-009

is dangerous and unsafe and should be demolished or repaired as provided by law.

SECTION 2: The determination that said building is dangerous and unsafe and a menace to life and property in the vicinity thereof and, therefore, a public nuisance is based upon the investigation report(s), information, and expertise of the building inspectors(s), as contained in the following:

See attached report(s) (Exhibit "A") and photo(s) (Exhibit "B")

which is/are attached hereto and incorporated herein by reference.

SECTION 3: The building inspector is authorized and directed to demolish said building.

SECTION 4: The Clerk of the City, or any other official of the City designated by the Mayor, is authorized and directed to give written notice as provided by law to the person or persons entitled to receive the same that the City will seek demolition of subject building(s) pursuant to all the rights and duties available to the City under current Illinois Statute designated the powers of a municipality in regard to demolition of buildings, unless the same shall have been demolished within thirty (30) days after issuance of such notice.

PASSED by the City Council of the City of Granite City, Illinois, this _____ day of _____, 20 ____.

APPROVED by the Mayor of the City of Granite City, Illinois, this _____ day of _____, 20 ____.

MAYOR

ATTESTED:

CITY CLERK

(SEAL)

Memo to File

October 25, 2017

RE: 2630 E. 24th St.

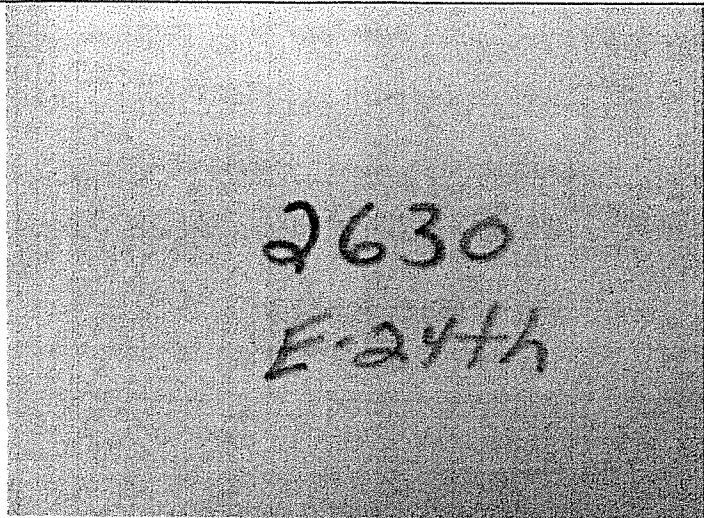
Recent inspection of the property located above revealed the following:

- 1. The building is vacant and abandoned without utilities.**
- 2. The building is open and accessible allowing access by delinquents and vagabonds.**
- 3. The building is decayed from termite and weather rot causing the foundation walls and roof to collapse.**
- 4. The building has broken windows, sagging gutters, decayed fascia boards, boarded up doors and windows.**
- 5. The electrical service needs to be upgraded and the residence needs to be inspected to insure that the electric is in compliance with City codes.**
- 6. The building is cluttered with junk, trash, and debris not in proper containers.**
- 7. The presence of rodents or other wild animals in and about the premises.**

It is the opinion of this office that the building poses a hazard to the community and the cost to bring the property up to code compliance will exceed 51% of the value of the property.

Building and Zoning Administrator

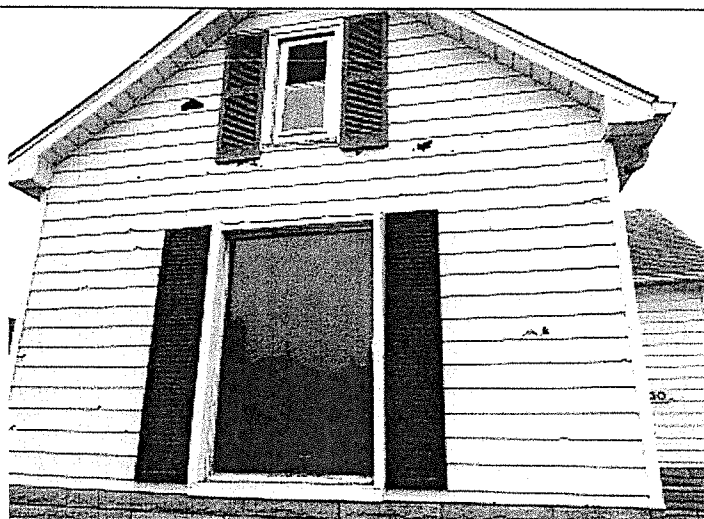
2630 E 24TH 10-11-17 PM JB



DSCN4408



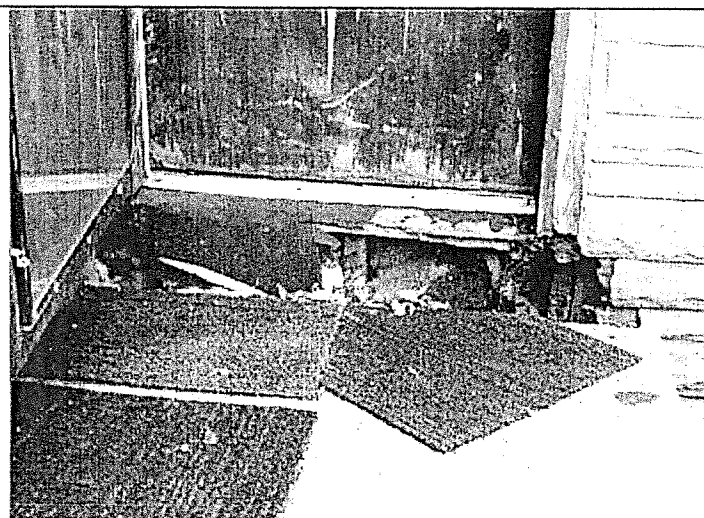
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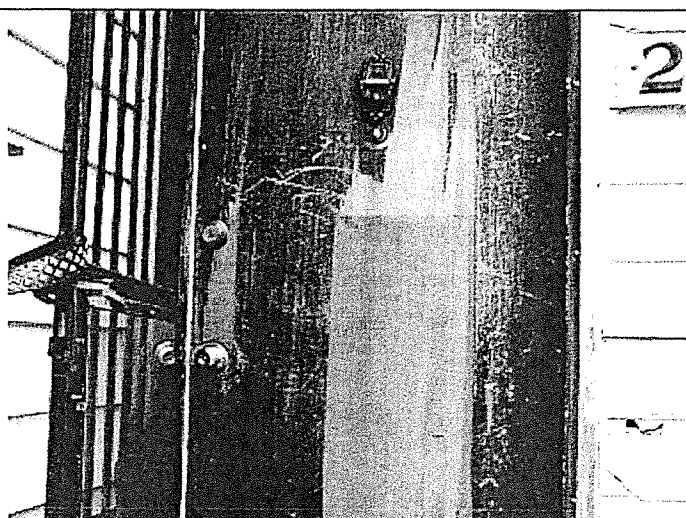
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DSCN4411

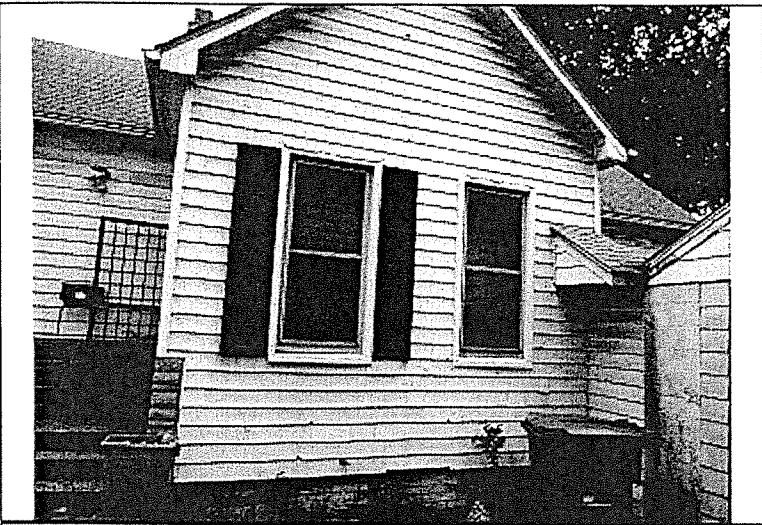


DSCN4412



DSCN4413

2630 E 24TH 10-11-17 PM JB



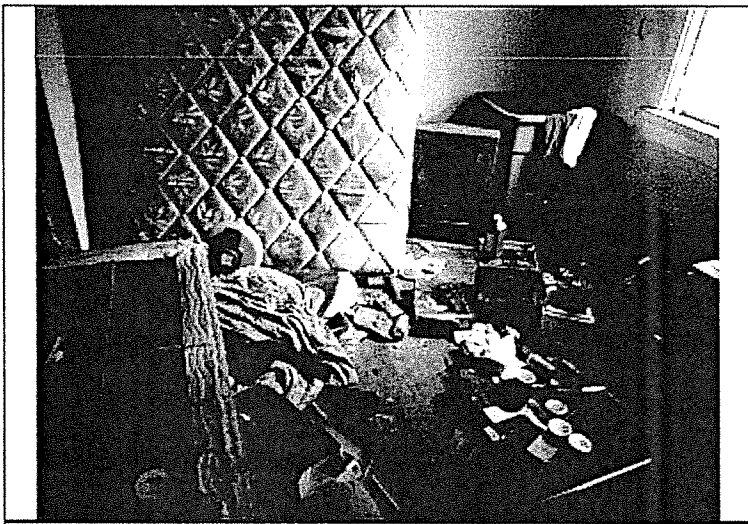
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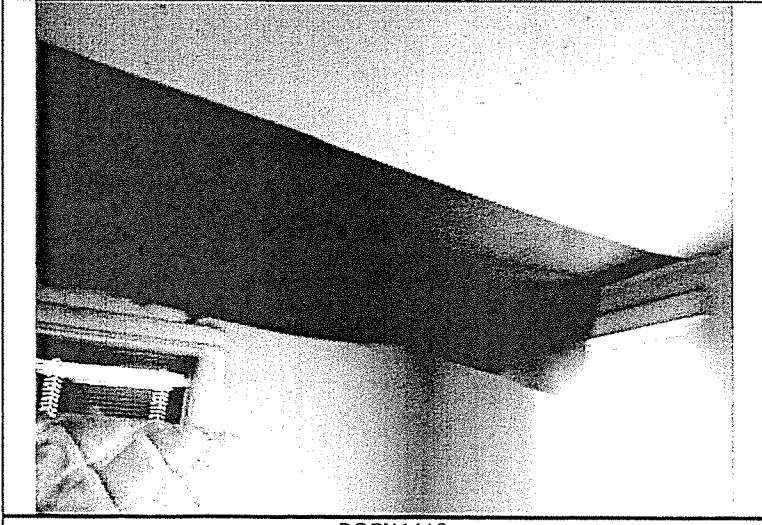
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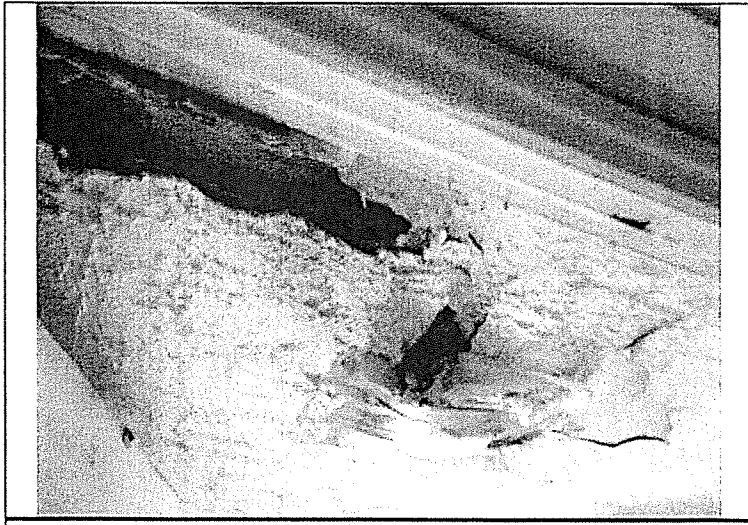
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DSCN4417



DSCN4418



DSCN4419

2630 E 24TH 10-11-17 PM JB



DSCN4420



DSCN4421



DSCN4422



DSCN4423



DSCN4424



DSCN4425

A RESOLUTION TO WAIVE AND RELEASE LIENS ON 2048 13th STREET

WHEREAS, the City of Granite City is a Home Rule unit pursuant to Article VII, Section 6, of the Illinois Constitution of 1970; and

WHEREAS, the property known as 2048 13th Street is located within the corporate limits of the City of Granite City; and

WHEREAS, the City of Granite City filed liens on the 2048 13th Street property, including liens filed for cutting of excess grass and weeds every year from 2010 through 2015, and recorded annually from 2011 through 2015, totaling \$4,844.00, and liens for sewer bills recorded July 26 and 22, 2013, for \$575.07; and

WHEREAS, the Madison County Trustee conveyed by Trustee's Deed the property commonly known as 2048 13th Street to one Thomas Hodgini, said Trustee's Deed recorded January 17, 2017; and

WHEREAS, the Granite City City Council is advised by the Office of the City Attorney that some or all its liens described above may possibly be unenforceable pursuant to said Trustee's Deed and related law.

NOW, THEREFORE, be it resolved and decreed by the City Council of the City of Granite City, Madison County, Illinois, that the following liens asserted by the City of Granite City on the property commonly known as 2048 13th Street, permanent parcel number 22-2-20-19-17-303-015, are hereby deemed and declared waived, and to be released. The liens hereby waived and authorized for release are: the grass and weed cutting liens recorded February 11, 2011; January 19, 2012; December 31, 2012; December 13, 2013; October 31, 2014; and October 29, 2015; and sewer liens recorded February 22 and 26, 2013.

The Office of the City Treasurer is hereby authorized to execute releases of the liens

described above, for said Thomas Hodgini to record at his cost, with the Madison County Recorder.

PASSED this ____ day of January, 2018.

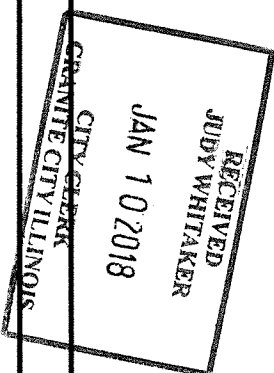
APPROVED: _____
Mayor Edward Hagnauer

ATTEST: _____
Judy Whitaker, City Clerk

89642



Office of Risk Management
Lynnette Kozar, Risk Manager
City of Granite City, IL. 62040
Worker's Compensation Report
All open claims as of 1/1/18



City Hall			
Tripped on floor mat	Foot		
		Paid	Reserved
City Hall Totals		\$ -	\$ 1,500.00
			Total
			1,500.00

Fire Department

Alleged Description	Alleged Body Part		
Lifting Fan	Back		
Hit ceiling of cab on truck	Neck , Back		
Alleges Working condition	Cardiac Condition		
Holding Stabilizing bar	Arm		
Pain during fire	Abdomen		
Electrical Shock	Hand		
Alleges repetitive trauma	Bilateral Hands		
Opening latch	Finger		
Fell holding charged hose	Both shoulders		
Fell during training exercise	Knee, Shoulder		
Ladder fell	Toe		
Assisting with house fire	Back		
Alleges Working conditions	PTSD		
Fire Department Totals		Paid	Reserved
		\$ 501,608.21	\$ 681,502.79
			Total
			1,183,111.00



*Office of Risk Management
Lynnette Kozer, Risk Manager
City of Granite City, IL. 62040
Worker's Compensation Report
All open claims as of 1/1/18*

Police Department

Alleged Description	Alleged Body Part	Paid	Reserved	Total
Trip and fall	Rt. Hand , Elbow			
Auto Accident	Arm, Neck			
Crawling through window	Multiple			
Subduing suspect	Back			
Tracking suspect in attic	Ribs			
Subduing suspect	Multiple			
Subduing suspect	Neck			
Subduing suspect	Neck			
Police Department Totals		\$ 908,192.78	\$ 795,348.27	\$ 1,703,541.05



*Office of Risk Management
Lynnette Kozer, Risk Manager
City of Granite City, IL. 62040
Worker's Compensation Report
All open claims as of 1/1/18*

Public Works

Alleged Description	Alleged Body Part	Paid	Reserved	Total
Stepped on manhole, flipped	Knees			
Pushing shovel in basin	Low Back			
Alleges opening gate	Low Back			
Alleges repetitive trauma	Hands, Elbow			
Opening Gate	Low Back			
Shoveling asphalt	Neck			
Charged line	Lt Calf and Leg			
Public Works Totals		\$ 385,980.49	\$ 474,962.51	\$ 860,943.00

Waste Water Treatment

Alleged Description	Alleged Body Part	Paid	Reserved	Total
Slipped on Truck runner	Shoulder			
Reaching on ladder	Low Back			
Opening valve	Back			
Fall on ice	Wrist			
Tripped over pipe	Arm, Back			
Handle slipped from valve	Head			
Working under sink	Neck			
WWTP Totals		\$ 527,521.01	\$ 276,574.99	\$ 804,096.00

Worker's Compensation Totals All Depts	\$ 2,323,302.49	\$ 2,229,888.56	\$ 4,553,191.05
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*Office of Risk Management
Lynnette Kozer, Risk Manager
City of Granite City, IL 62040
Liability, Property and Auto Report
All open claims as of 1/1/18*

Liability, Property, Auto

Alleged Description	Complaint	Paid	Reserved	Total
Alleges harassment	Liability			
Alleges Retaliation	Liability			
Trip and Fall	Liability			
Trip and Fall	Liability			
Alleges information released	Civil			
Fell on manhole cover	Liability			
Alleges inadequate lighting	Liability			
Sewer Back up	Liability			
Sewer Back up	Liability			
Sewer Back up	Liability			
Sewer Back up	Liability			
Sewer Back up	Liability			
Sewer Break	Liability			
Sewer Break	Liability			
Ambulance backed, parked car	Liability			
Ambulance backed, parked car	Liability			
Sewer Back up	Liability			
Civil Rights - 4th & 14th Amendment	Liability			
Total All Liability, Property and Auto		\$ 153,453.00	\$ 404,583.00	\$ 558,036.00



*Office of Risk Management
Lynnette Kozer, Risk Manager
City of Granite City, IL. 62040
All open claims as of 1/1/18*

Summary all Open Files

Total Open Claims 53

	Paid	Reserve	Total
City Hall	\$ -	\$ 1,500.00	\$ 1,500.00
Fire Totals	\$ 501,608.21	\$ 681,502.79	\$ 1,183,111.00
Police Totals	\$ 908,192.78	\$ 795,348.27	\$ 1,703,541.05
Public Works Totals	\$ 385,980.49	\$ 474,962.51	\$ 860,943.00
WWTP Totals	\$ 527,521.01	\$ 276,574.99	\$ 804,096.00
Liability Totals	\$ 153,453.00	\$ 404,583.00	\$ 558,036.00
All Open Files Totals	\$2,476,755.49	\$ 2,634,471.56	\$ 5,111,227.05

ORDINANCE NO. _____
AN ORDINANCE TO APPROVE THE RENEWAL OF THE LAREDO REMOTE
ACCESS LICENSE AGREEMENT AND ESCROW ACCOUNT AGREEMENT, ALL
WITH THE MADISON COUNTY RECORDER

WHEREAS, the City of Granite City is a home rule unit pursuant to Article VII, Section 6, of the Illinois State Constitution of 1970; and

WHEREAS, in the course of providing City services, filing liens, drafting Ordinance violation citations, and buying and selling real estate parcels, the City of Granite City frequently requires the names and addresses of persons holding ownership interests in real estate in Granite City, including but not limited to fee simple title holders, mortgagees, tax purchasers, and lienors; and

WHEREAS, before 2005, the City of Granite City typically paid third party title companies to conduct title searches; and

WHEREAS, the Granite City City Council hereby finds that, in the last several years, Granite City Building and Zoning, Inspection, Treasurer, Legal Department, and other Offices within the City of Granite City, saved the City time and money by reviewing the records of the Madison County Recorder online, to identify individuals and businesses claiming ownership interests in real estate parcels, instead of paying for and awaiting searches by third party title companies; and

WHEREAS, the Office of the Madison County Recorder allows access to many of its records online, in exchange for a monthly subscription and per-minute fee, and copies of relevant documents may be similarly purchased online from the Madison County Recorder.

NOW, THEREFORE, be it Ordained and decreed by the City Council of the City of Granite City, Madison County, Illinois, as follows:

1. The Office of the Mayor, with the assistance of the Offices of the Comptroller and

Treasurer, is hereby authorized to renew the City of Granite City's agreement with the Madison County Recorder, by executing the attached Laredo Remote Access License Agreement, and attached Avid Escrow Account Agreement. The Office of the Mayor is specifically further authorized to designate the purchase of "Plan 5" under the attached Agreement, at the cost of \$400.00 per month, plus any copying costs.

2. This Ordinance shall take effect upon passage. This Ordinance may be published in pamphlet form by the Office of the City Clerk.

ADOPTED by the City Council of the City of Granite City this 16th day of January, 2018.

APPROVED: _____ ATTEST: _____
Mayor Edward Hagnauer City Clerk Judy Whitaker

MADISON COUNTY RECORDER

Amy M. Meyer

P.O. Box 308 – Edwardsville, IL 62025

618.296.4475 / Fax 618.692.9843

recorder@co.madison.il.us

LAREDO REMOTE ACCESS LICENSE AGREEMENT

This agreement made and entered into this _____ day of _____, in the year _____,
by and between the Madison County Recorder's Office (Licensor) and _____
(Licensee).

Company Name: _____
Contact Name: _____
Phone Number: _____
Address: _____
Email: _____

Licensor and Licensee desire to enter into this Agreement whereby Licensor grants Licensee a limited, non-exclusive, and revocable right to print copies of recorded images from the Licensor's remotely available digitized documents. This Agreement is further subject to rules and regulations as set forth by Fidlar Technologies' Terms of Use.

The term of this Agreement shall be from the execution date to and including December 31, 2018, unless terminated pursuant to the provisions contained herein.

Subscriber shall select from the following user plans:

Quantity of Plans	Plan Selection	Per Minute	Subscriber Fee and Minimum Monthly Balance	Minimum Overage Fee	Laredo Enrollment Discounted Copy Fees
	Plan 1	1 – 250 minutes	\$75/month	\$0.25/minute	\$0.35
	Plan 2	251 – 500 minutes	\$125/month	\$0.23/minute	\$0.35
	Plan 3	501 – 1000 minutes	\$200/month	\$0.18/minute	\$0.35
	Plan 4	1001 – 2000 minutes	\$300/month	\$0.15/minute	\$0.35
	Plan 5	2001 – Unlimited minutes	\$400/month	Per month	\$0.35

LAREDO REMOTE ACCESS LICENSE AGREEMENT – Cont'd.

LAREDO REMOTE ACCESS USER NAME/PASSWORD ASSIGNMENT

Plan Selection	Employee Name	User Name	Password

User Names and Passwords are not case-sensitive.

Only one User Name per agreement plan.

Licensee agrees to promptly notify in writing the Madison County Recorder's Office of any changes in staffing that may affect the assignment of Laredo passwords. Licensee understands by entering into this Agreement, the Licensee is responsible for all minutes accrued by its identified users. The Licensor agrees to promptly remove the passwords of persons who are no longer authorized users and assign new passwords to staff as provided by the Licensee in writing. The Licensee is responsible for all charges incurred by their assigned Laredo logins and passwords.

Signature of Licensee

Company Name

Is this company a government entity? ____ Yes ____ No

MADISON COUNTY RECORDER

Amy M. Meyer

P.O. Box 308 – Edwardsville, IL 62025

618.296.4475 / Fax 618.692.9843

recorder@co.madison.il.us

AVID ESCROW ACCOUNT AGREEMENT

This agreement made and entered into this _____ day of _____, in the year _____,
by and between the Madison County Recorder's Office (Licensor) and _____
(Licensee).

Company Name: _____
Contact Name: _____
Phone Number: _____
Address: _____
Email: _____

Licensor and Licensee desire to enter into this Agreement whereby Licensor grants Licensee a limited, non-exclusive, and revocable right to record and/or print copies.

The term of this Agreement shall be from the execution date to and including December 31, 2018, unless terminated pursuant to the provisions contained herein.

New Licensees will be assigned a user name and password following the receipt of the signed agreement and Fifty Dollar (\$50.00) deposit, and shall maintain an account balance of Fifty Dollars (\$50.00) with Licensor for at least thirty (30) days after the receipt of this signed agreement.

Licensee will select one of the following user plans indicating choice with an "X":

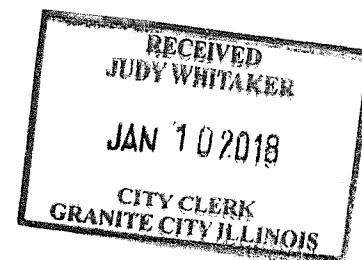
Copies Only Service	Copies and Recording Services
\$1/copy for any copy made within the Madison County Recorder's Office.	\$1/copy for any copy made within the Madison County Recorder's Office and set recording fees.

_____ User Name
_____ Password

Signature of Licensee

DEPARTMENT TOTALS
 DEPARTMENT: 10 -01 MAYOR

		1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS		9 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		9 CHECK(S)	
NET		-	11385.98		0.00 <th></th> <td>0.00<th></th><td>0.00<th></th><td>11385.98</td></td></td>		0.00 <th></th> <td>0.00<th></th><td>11385.98</td></td>		0.00 <th></th> <td>11385.98</td>		11385.98
EARNINGS		HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS	-		16249.82		0.00		0.00		0.00		16249.82
SALARY	-	421.64	15083.82	0.00	0.00	0.00	0.00	0.00	0.00	421.64	15083.82
HOURLY PAY	-	43.00	516.00	0.00	0.00	0.00	0.00	0.00	0.00	43.00	516.00
TIF ADMIN	-	0.00	500.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	500.00
DECLINE	-	0.00	150.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	150.00
DEDUCTIONS		EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-		0.00	337.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	337.50
HLTH SNG PR-		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH SNG AF-		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FML AF-		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ST FARM INS-		3.10	3.10	0.00	0.00	0.00	0.00	0.00	0.00	3.10	3.10
IPPFA 457 P-		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
UNITED WAY -		0.00	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
BAS 125 PLA-		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
DIVERS 457%-		0.00	118.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	118.64
I.M.R.F	-	1339.51	554.03	0.00	0.00	0.00	0.00	0.00	0.00	1339.51	554.03
TAXES		TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-		15239.65	1894.64	0.00	0.00	0.00	0.00	0.00	0.00	15239.65	1894.64
STATE W/H	-	15239.65	736.62	0.00	0.00	0.00	0.00	0.00	0.00	15239.65	736.62
FICA	-	15912.32	986.57	0.00	0.00	0.00	0.00	0.00	0.00	15912.32	986.57
MEDICARE	-	15912.32	230.74	0.00	0.00	0.00	0.00	0.00	0.00	15912.32	230.74
EIC CREDIT	-		0.00		0.00		0.00		0.00		0.00



DEPARTMENT TOTALS										
DEPARTMENT: 10 -02			CITY CLERK							
1ST - QUARTER TOTALS			2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
4 CHECK(S)			0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		4 CHECK(S)	
NBR CHECKS -										
NET -		5161.20		0.00		0.00		0.00		5161.20
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		8064.16		0.00		0.00		0.00		8064.16
SALARY -	346.64	7914.16	0.00	0.00	0.00	0.00	0.00	0.00	346.64	7914.16
DECLINE -	0.00	150.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	150.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	225.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	225.00
HLTH FML AF-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ST FARM INS-	6.20	6.20	0.00	0.00	0.00	0.00	0.00	0.00	6.20	6.20
IPPPA 457 P-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
AFSCME 31 -	0.00	97.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	97.48
UNITED WAY -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
BAS 125 PLA-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CHAPTER 13 -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARN FEE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
I.M.R.F -	877.38	362.89	0.00	0.00	0.00	0.00	0.00	0.00	877.38	362.89
VOL ADD CON-	0.00	104.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	104.17
HSA FUND -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MELLON ADD -	0.00	139.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	139.16
OPTUM ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
REIMBURSE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	7337.11	1002.38	0.00	0.00	0.00	0.00	0.00	0.00	7337.11	1002.38
STATE W/H -	7337.11	376.64	0.00	0.00	0.00	0.00	0.00	0.00	7337.11	376.64
FICA -	7700.00	477.39	0.00	0.00	0.00	0.00	0.00	0.00	7700.00	477.39
MEDICARE -	7700.00	111.65	0.00	0.00	0.00	0.00	0.00	0.00	7700.00	111.65
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

DEPARTMENT TOTALS										
DEPARTMENT: 10 -03			LEGISLATIVE - ALDERM							
1ST - QUARTER TOTALS			2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	10 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		10 CHECK(S)	
NET -	2052.40		0.00		0.00		0.00		2052.40	
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		2633.30		0.00		0.00		0.00		2633.30
SALARY -	45.00	2633.30	0.00	0.00	0.00	0.00	0.00	0.00	45.00	2633.30
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
ST FARM INS	1.55	1.55	0.00	0.00	0.00	0.00	0.00	0.00	1.55	1.55
I.M.R.F -	143.25	59.25	0.00	0.00	0.00	0.00	0.00	0.00	143.25	59.25
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	2574.05	189.62	0.00	0.00	0.00	0.00	0.00	0.00	2574.05	189.62
STATE W/H -	2574.05	128.98	0.00	0.00	0.00	0.00	0.00	0.00	2574.05	128.98
FICA -	2633.30	163.30	0.00	0.00	0.00	0.00	0.00	0.00	2633.30	163.30
MEDICARE -	2633.30	38.20	0.00	0.00	0.00	0.00	0.00	0.00	2633.30	38.20
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

DEPARTMENT TOTALS										
DEPARTMENT: 10 -04 TREASURER										
1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **		
NBR CHECKS -	4 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		4 CHECK(S)	
NET -	4675.41		0.00		0.00		0.00		4675.41	
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		7811.37		0.00		0.00		0.00		7811.37
SALARY -	346.65	7811.37	0.00	0.00	0.00	0.00	0.00	0.00	346.65	7811.37
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	225.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	225.00
HLTH SNG PR-	0.00	62.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	62.50
HLTH SNG AF-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FML AF-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	151.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	151.87
LOAN PAYMEN-	0.00	54.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	54.08
LOAN PAYMEN-	0.00	17.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17.48
ST FARM INS-	3.10	3.10	0.00	0.00	0.00	0.00	0.00	0.00	3.10	3.10
IPPPFA 457 P-	0.00	220.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	220.20
AFSCME 31 -	0.00	97.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	97.48
UNITED WAY -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
BAS 125 PLA-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
I.M.R.F -	849.87	351.51	0.00	0.00	0.00	0.00	0.00	0.00	849.87	351.51
MELLON ADD -	0.00	50.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	50.00
LOAN PAYMEN-	0.00	23.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	23.72
LOAN PAYMEN-	0.00	32.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	32.35
REIMBURSE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	6902.16	937.73	0.00	0.00	0.00	0.00	0.00	0.00	6902.16	937.73
STATE W/H -	6902.16	337.18	0.00	0.00	0.00	0.00	0.00	0.00	6902.16	337.18
FICA -	7473.87	463.39	0.00	0.00	0.00	0.00	0.00	0.00	7473.87	463.39
MEDICARE -	7473.87	108.37	0.00	0.00	0.00	0.00	0.00	0.00	7473.87	108.37
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

DEPARTMENT TOTALS										
DEPARTMENT: 10 -05			FINANCIAL ADMINISTRATION							
1ST - QUARTER TOTALS			2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	3 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		3 CHECK(S)	
NET -	3594.55		0.00		0.00		0.00		3594.55	
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		5282.34		0.00		0.00		0.00		5282.34
SALARY -	216.62	5032.34	0.00	0.00	0.00	0.00	0.00	0.00	216.62	5032.34
WC ED -	0.00	250.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	250.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	112.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	112.50
HLTH SNG PR-	0.00	62.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	62.50
ST FARM INS-	1.55	1.55	0.00	0.00	0.00	0.00	0.00	0.00	1.55	1.55
AFSCME 31 -	0.00	48.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	48.74
UNITED WAY -	0.00	5.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5.00
I.M.R.F -	574.72	237.71	0.00	0.00	0.00	0.00	0.00	0.00	574.72	237.71
MELLON ADD -	0.00	25.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25.00
REIMBURSE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	4844.63	566.18	0.00	0.00	0.00	0.00	0.00	0.00	4844.63	566.18
STATE W/H -	4844.63	239.81	0.00	0.00	0.00	0.00	0.00	0.00	4844.63	239.81
FICA -	5082.34	315.11	0.00	0.00	0.00	0.00	0.00	0.00	5082.34	315.11
MEDICARE -	5082.34	73.69	0.00	0.00	0.00	0.00	0.00	0.00	5082.34	73.69
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

DEPARTMENT: 10 -06

DEPARTMENT TOTALS
IT DEPARTMENT

1ST - QUARTER TOTALS			2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	2 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		2 CHECK(S)	
NET -	3975.80		0.00		0.00		0.00		3975.80	
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		6125.00		0.00		0.00		0.00		6125.00
SALARY -	173.32	6125.00	0.00	0.00	0.00	0.00	0.00	0.00	173.32	6125.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	112.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	112.50
HLTH SNG AF-	0.00	62.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	62.50
HLTH FML AF-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
UNITED WAY -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
I.M.R.F -	666.40	275.62	0.00	0.00	0.00	0.00	0.00	0.00	666.40	275.62
MELLON ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IMRF V.A.C -	0.00	50.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	50.00
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	5736.88	904.64	0.00	0.00	0.00	0.00	0.00	0.00	5736.88	904.64
STATE W/H -	5736.88	283.97	0.00	0.00	0.00	0.00	0.00	0.00	5736.88	283.97
FICA -	6012.50	372.78	0.00	0.00	0.00	0.00	0.00	0.00	6012.50	372.78
MEDICARE -	6012.50	87.19	0.00	0.00	0.00	0.00	0.00	0.00	6012.50	87.19
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

DEPARTMENT: 10 -07 POLICE

	1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	77 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		77 CHECK(S)	
NET -	156056.46		0.00		0.00		0.00		156056.46	
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		234268.24		0.00		0.00		0.00		234268.24
SALARY -	5992.05	192173.70	0.00	0.00	0.00	0.00	0.00	0.00	5992.05	192173.70
HOURLY PAY -	151.50	1573.88	0.00	0.00	0.00	0.00	0.00	0.00	151.50	1573.88
SHORT/CHG -	204.00	7030.42	0.00	0.00	0.00	0.00	0.00	0.00	204.00	7030.42
REIM OT -	2.00	98.33	0.00	0.00	0.00	0.00	0.00	0.00	2.00	98.33
OVERTIME PA-	169.75	8591.04	0.00	0.00	0.00	0.00	0.00	0.00	169.75	8591.04
C O R -	140.00	6300.00	0.00	0.00	0.00	0.00	0.00	0.00	140.00	6300.00
HOLIDAY -	353.00	16979.10	0.00	0.00	0.00	0.00	0.00	0.00	353.00	16979.10
RANK DIFF -	114.00	299.70	0.00	0.00	0.00	0.00	0.00	0.00	114.00	299.70
DISPATCH 2 -	280.00	280.00	0.00	0.00	0.00	0.00	0.00	0.00	280.00	280.00
SHIF/DIFF3 -	1109.00	720.85	0.00	0.00	0.00	0.00	0.00	0.00	1109.00	720.85
WC ED -	0.00	200.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	200.00
INJURED -	0.00	427.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	427.74
DECLINE -	0.00	300.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	300.00
NO PAY -	24.00	548.52	0.00	0.00	0.00	0.00	0.00	0.00	24.00	548.52
MILITARY LV-	0.00	1428.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1428.50
LIEU OF -	64.00	1378.60	0.00	0.00	0.00	0.00	0.00	0.00	64.00	1378.60
COMP PAY -	12.34	747.38	0.00	0.00	0.00	0.00	0.00	0.00	12.34	747.38
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	225.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	225.00
HLTH SNG PR-	0.00	62.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	62.50
HLTH SNG AF-	0.00	187.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	187.50
HLTH FML AF-	0.00	450.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	450.00
PBPA CHIEF -	0.00	60.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	60.00
LOAN PAYMEN-	0.00	1123.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1123.05
LOAN PAYMEN-	0.00	210.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	210.44
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ST FARM INS-	66.65	66.65	0.00	0.00	0.00	0.00	0.00	0.00	66.65	66.65
IPPFA 457 P-	0.00	1601.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1601.00
PBPA LABOR -	0.00	2646.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2646.00
AFSCME 31 -	0.00	536.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	536.14
UNITED WAY -	0.00	5.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5.00
BAS 125 PLA-	0.00	92.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	92.50
POLICE/FIRE-	0.00	101.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	101.94
CHILD SUPPT-	0.00	1448.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1448.01
DIVERS 457%-	0.00	1405.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1405.70
GARN FEE -	0.00	10.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10.10
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARNISHMENT-	0.00	14.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14.51
GARNISHMENT-	0.00	490.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	490.32
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARNISHMENT-	0.00	268.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	268.07
PRIN LOAN -	0.00	57.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	57.68
LOAN PYMT -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PRINCIPAL -	0.00	415.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	415.00
I.M.R.F -	3013.92	1246.59	0.00	0.00	0.00	0.00	0.00	0.00	3013.92	1246.59
POL PENSION-	0.00	16664.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16664.85

MELLON ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	280.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	280.78
REIMBURSE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	212555.10	32908.79	0.00	0.00	0.00	0.00	0.00	0.00	212555.10	32908.79
STATE W/H -	212555.10	10426.42	0.00	0.00	0.00	0.00	0.00	0.00	212555.10	10426.42
FICA -	29287.97	1815.86	0.00	0.00	0.00	0.00	0.00	0.00	29287.97	1815.86
MEDICARE -	233888.24	3391.38	0.00	0.00	0.00	0.00	0.00	0.00	233888.24	3391.38
SIC CREDIT -		0.00		0.00		0.00		0.00		0.00

DEPARTMENT: 10 -08 FIRE & AMBULANCE

** TOTAL **

[illegible][illegible]

UMB ADDITIO-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
UMB ADD PRE-	0.00	158.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	158.66
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	197564.89	33470.40	0.00	0.00	0.00	0.00	0.00	0.00	197564.89	33470.40
STATE W/H -	197564.89	9662.32	0.00	0.00	0.00	0.00	0.00	0.00	197564.89	9662.32
FICA -	3265.90	202.49	0.00	0.00	0.00	0.00	0.00	0.00	3265.90	202.49
MEDICARE -	192706.23	2794.27	0.00	0.00	0.00	0.00	0.00	0.00	192706.23	2794.27
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

DEPARTMENT TOTALS										
DEPARTMENT: 10 -09 CIVIL DEFENSE										
1ST - QUARTER TOTALS			2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS	0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)	
NET -	0.00		0.00		0.00		0.00		0.00	
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -	0.00		0.00		0.00		0.00		0.00	
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STATE W/H -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FICA -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MEDICARE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
EIC CREDIT -	0.00		0.00		0.00		0.00		0.00	

DEPARTMENT TOTALS										
DEPARTMENT: 10 -11			SAFETY							
1ST - QUARTER TOTALS			2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	2 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		2 CHECK(S)	
NET -	2671.86		0.00		0.00		0.00		2671.86	
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		4356.47		0.00		0.00		0.00		4356.47
SALARY -	173.32	4268.97	0.00	0.00	0.00	0.00	0.00	0.00	173.32	4268.97
WC ED -	0.00	87.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	87.50
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	225.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	225.00
HLTH SNG PR-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	79.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	79.13
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ST FARM INS-	3.10	3.10	0.00	0.00	0.00	0.00	0.00	0.00	3.10	3.10
IPPPA 457 P-	0.00	90.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	90.00
AFSCME 31 -	0.00	48.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	48.74
UNITED WAY -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
I.M.R.F -	473.98	196.05	0.00	0.00	0.00	0.00	0.00	0.00	473.98	196.05
HSA FUND -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MELLON ADD -	0.00	50.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	50.00
OPTUM ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	3795.42	492.49	0.00	0.00	0.00	0.00	0.00	0.00	3795.42	492.49
STATE W/H -	3795.42	187.87	0.00	0.00	0.00	0.00	0.00	0.00	3795.42	187.87
FICA -	4081.47	253.05	0.00	0.00	0.00	0.00	0.00	0.00	4081.47	253.05
MEDICARE -	4081.47	59.18	0.00	0.00	0.00	0.00	0.00	0.00	4081.47	59.18
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

DEPARTMENT: 10 -12

DEPARTMENT TOTALS
BUILDING & ZONING

1ST - QUARTER TOTALS			2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **		
NBR CHECKS -	12 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		12 CHECK(S)		
NET -	14126.46		0.00		0.00		0.00		14126.46		
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	
GROSS -		21087.55		0.00		0.00		0.00		21087.55	
SALARY -	953.26	19975.25	0.00	0.00	0.00	0.00	0.00	0.00	953.26	19975.25	
HOURLY PAY -	32.00	608.00	0.00	0.00	0.00	0.00	0.00	0.00	32.00	608.00	
RANK DIFF -	8.00	16.80	0.00	0.00	0.00	0.00	0.00	0.00	8.00	16.80	
WC ED -	0.00	87.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	87.50	
AUX COOR -	0.00	100.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	100.00	
DECLINE -	0.00	300.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	300.00	
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
H.S.A -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
HLTH FAM PR-	0.00	562.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	562.50	
HLTH FML AF-	0.00	112.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	112.50	
LOAN PAYMEN-	0.00	33.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	33.29	
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
ST FARM INS-	12.40	12.40	0.00	0.00	0.00	0.00	0.00	0.00	12.40	12.40	
IPPFA 457 P-	0.00	25.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25.00	
PBPA LABOR -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
AFSCME 31 -	0.00	292.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	292.44	
UNITED WAY -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
BAS 125 PLA-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
GARN FEE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
PRINCIPAL -	0.00	250.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	250.00	
I.M.R.F -	2228.18	921.58	0.00	0.00	0.00	0.00	0.00	0.00	2228.18	921.58	
POL PENSION-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
LOAN PAYMEN-	0.00	29.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29.18	
REIMBURSE -	0.00	25.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25.00	
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	
FEDERAL W/H-	19328.47	2179.22	0.00	0.00	0.00	0.00	0.00	0.00	19328.47	2179.22	
STATE W/H -	19328.47	947.80	0.00	0.00	0.00	0.00	0.00	0.00	19328.47	947.80	
FICA -	20525.05	1272.56	0.00	0.00	0.00	0.00	0.00	0.00	20525.05	1272.56	
MEDICARE -	20525.05	297.62	0.00	0.00	0.00	0.00	0.00	0.00	20525.05	297.62	
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00	

DEPARTMENT TOTALS										
DEPARTMENT: 10 -13			PUBLIC WORKS							
1ST - QUARTER TOTALS			2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
32 CHECK(S)			0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		32 CHECK(S)	
50953.51			0.00		0.00		0.00		50953.51	
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		79095.88		0.00		0.00		0.00		79095.88
SALARY -	2773.13	75337.06	0.00	0.00	0.00	0.00	0.00	0.00	2773.13	75337.06
OVERTIME PA-	1.50	63.39	0.00	0.00	0.00	0.00	0.00	0.00	1.50	63.39
CALL OUT -	86.00	3605.05	0.00	0.00	0.00	0.00	0.00	0.00	86.00	3605.05
RANK DIFF -	136.50	74.38	0.00	0.00	0.00	0.00	0.00	0.00	136.50	74.38
CDL LIC -	32.00	16.00	0.00	0.00	0.00	0.00	0.00	0.00	32.00	16.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
ST FARM INS	23.25	24.52	0.00	0.00	0.00	0.00	0.00	0.00	23.25	24.52
TEAMSTERS52-	0.00	1057.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1057.00
LABORER 397-	0.00	720.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	720.00
UNITED WAY -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CHILD SUPPT-	0.00	712.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	712.20
EARN FEE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PRINCIPAL -	0.00	130.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	130.00
I.M.R.F -	8605.66	3559.35	0.00	0.00	0.00	0.00	0.00	0.00	8605.66	3559.35
PAINTER DUE-	0.00	95.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	95.84
VOL ADD CON-	0.00	566.56	0.00	0.00	0.00	0.00	0.00	0.00	0.00	566.56
2%-LABOR -	0.00	768.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	768.11
OPTUM ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
REIMBURSE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PNTRS ADMIN-	0.00	4.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.34
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	75406.53	10757.40	0.00	0.00	0.00	0.00	0.00	0.00	75406.53	10757.40
STATE W/H -	75406.53	3696.20	0.00	0.00	0.00	0.00	0.00	0.00	75406.53	3696.20
FICA -	79095.88	4903.97	0.00	0.00	0.00	0.00	0.00	0.00	79095.88	4903.97
MEDICARE -	79095.88	1146.88	0.00	0.00	0.00	0.00	0.00	0.00	79095.88	1146.88
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

DEPARTMENT TOTALS
SUMMER PART-TIME HEL

DEPARTMENT: 10 -23

SUMMER PART-TIME HEL

1ST - QUARTER TOTALS			2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)	
NET -	0.00		0.00		0.00		0.00		0.00	
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		0.00		0.00		0.00		0.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STATE W/H -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FICA -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MEDICARE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

DEPARTMENT TOTALS										
DEPARTMENT: 15 -01 CINEMA										
		1ST - QUARTER TOTALS	2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -		14 CHECK(S)	0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		14 CHECK(S)	
NET -		7567.10	0.00		0.00		0.00		7567.10	
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		10628.46		0.00		0.00		0.00		10628.46
SALARY -	173.34	7545.53	0.00	0.00	0.00	0.00	0.00	0.00	173.34	7545.53
HOURLY PAY -	368.87	3082.93	0.00	0.00	0.00	0.00	0.00	0.00	368.87	3082.93
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH SNG PR-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH SNG AF-	0.00	62.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	62.50
I.M.R.F -	820.95	339.55	0.00	0.00	0.00	0.00	0.00	0.00	820.95	339.55
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	10288.91	1349.25	0.00	0.00	0.00	0.00	0.00	0.00	10288.91	1349.25
STATE W/H -	10288.91	496.98	0.00	0.00	0.00	0.00	0.00	0.00	10288.91	496.98
FICA -	10628.46	658.98	0.00	0.00	0.00	0.00	0.00	0.00	10628.46	658.98
MEDICARE -	10628.46	154.10	0.00	0.00	0.00	0.00	0.00	0.00	10628.46	154.10
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

DEPARTMENT TOTALS										
DEPARTMENT: 30 -36 MOTOR FUEL FUND PROJ										
1ST - QUARTER TOTALS			2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)	
NET -	0.00		0.00		0.00		0.00		0.00	
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -	0.00		0.00		0.00		0.00		0.00	
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STATE W/H -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FICA -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MEDICARE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
EIC CREDIT -	0.00		0.00		0.00		0.00		0.00	

PAYROLL

TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	83837.47	11663.20	0.00	0.00	0.00	0.00	0.00	0.00	83837.47	11663.20
STATE W/H -	83837.47	4067.19	0.00	0.00	0.00	0.00	0.00	0.00	83837.47	4067.19

FICA	-	88658.59	5496.84	0.00	0.00	0.00	0.00	0.00	0.00	88658.59	5496.84
MEDICARE	-	88658.59	1285.56	0.00	0.00	0.00	0.00	0.00	0.00	88658.59	1285.56
3IC CREDIT	-		0.00		0.00		0.00		0.00		0.00

DEPARTMENT TOTALS										
DEPARTMENT: 71 -30 INDUSTRIAL PRETREATM										
1ST - QUARTER TOTALS			2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS	1 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		1 CHECK(S)	
NET	-	1577.40	0.00		0.00		0.00		1577.40	
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS	-	2755.02		0.00		0.00		0.00		2755.02
SALARY	-	86.66 2705.82	0.00	0.00	0.00	0.00	0.00	0.00	86.66	2705.82
LIC CERT	-	0.00 49.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	49.20
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH SNG PR-	0.00	62.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	62.50
ST FARM INS-	1.55	1.55	0.00	0.00	0.00	0.00	0.00	0.00	1.55	1.55
IPPPFA 457 P-	0.00	200.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	200.00
ENG LOCAL39-	0.00	75.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	75.75
UNITED WAY -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
I.M.R.F	- 299.75	123.98	0.00	0.00	0.00	0.00	0.00	0.00	299.75	123.98
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	2368.54	390.62	0.00	0.00	0.00	0.00	0.00	0.00	2368.54	390.62
STATE W/H -	2368.54	117.24	0.00	0.00	0.00	0.00	0.00	0.00	2368.54	117.24
FICA	- 2692.52	166.94	0.00	0.00	0.00	0.00	0.00	0.00	2692.52	166.94
MEDICARE	- 2692.52	39.04	0.00	0.00	0.00	0.00	0.00	0.00	2692.52	39.04
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

FICA	-	283050.17	17549.23	0.00	0.00	0.00	0.00	0.00	0.00	283050.17	17549.23
MEDICARE	-	677090.77	9817.87	0.00	0.00	0.00	0.00	0.00	0.00	677090.77	9817.87
EIC CREDIT	-		0.00		0.00	0.00		0.00			0.00